L14000012955

(Re	equestor's Name)	
(Ac	idress)	<u>.</u>
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	rsiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

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FILED 2024 AUG 30 AM II: 48

COVER LETTER

TO: Registration Se Division of Cor			
SUBJECT: GLO SYST	TEMS LLC		
	Name of Lim	ited Liability Company	
	Amendment and fee(s) are sub	-	
riease return an correspo	ondence concerning this matter	to the following:	
	LINDA SNOEK		
	•	Name of Person	
	GLO SYSTEMS LLC		
		Piππ/Company	
	280 HASTINGS ROAD	Address	
		Audiess	
	ST AUGUSTINE FLORE	DA 32084 City/State and Zip Code	<u> </u>
	gavin@morganhopeusa.com	n	
		to be used for future annual report noti	fication)
For further information c	concerning this matter, please co	all:	
LINDA SNOEK		at (904) 6870660	
Name o	f Person	Area Code Daytim	e Telephone Number
Enclosed is a check for the	he following amount:		
□ \$25.00 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addres		Street Address:	

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

GLO SYSTEMS LLC				
(Name of the Limited Liability Compa (A Florida Limited	iny as it now appears on our recording the control of the control	<u>rds.</u>)		
The Articles of Organization for this Limited Liability Company	were filed on 04/16/2014		and as	signed
Florida document number L14000062955				
This amendment is submitted to amend the following:				
a. If amending name, enter the new name of the limited liab	ility company here:			
STUFF PLUS PRODUCTS LLC				
he new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LL	.C" or the abbi	reviation "I.	LC."
Enter new principal offices address, if applicable:	280 HASTINGS ROAD			
Principal office address MUST BE A STREET ADDRESS)	ST AUGUSTINE, FLORIDA	32084		
			20	· · · · · · · · · · · · · · · · · · ·
Inter new mailing address, if applicable:	280 HASTINGS ROAD		1024 AUG	
Mailing address MAY BE A POST OFFICE BOX)	ST AUGUSTINE, FLORIDA	32084 🗒	90	
		- T.	돌 🖰	,
		041 1041	£.	
If amending the registered agent and/or registered office a gent and/or the new registered office address here:	address on our records, ente	r the paine	atthe ne	<u>w registe</u>
			1	
Name of New Registered Agent:				
New Registered Office Address:				
	Enter Florida street addre	288		
<u> </u>		lorida		
~	City		Zip Code	

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
			
			□Remove
			Change
			□Add
	_		□Remove
			☐Change
			□Add
			□Remove
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			□ Change
			□Add
			Remove
		□Change	
			□Add
		 	□Remove
			□ Change

Page 2 of 3

If ame	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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lf an eff <u>Note:</u>	ve date, if other than the date of filing:
	ford specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: 90th day after the record is filed.
Dated	28th August . 2024.
	- Snoek
	Signature of a member quauthorized representative of a member
	LINDA SNOEK
	Typed or printed name of signee