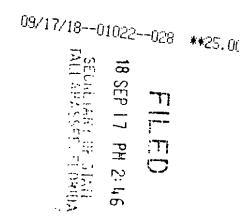
## 14000090642

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PICK-UP WAIT MAI	L
(Business Entity Name)	
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## **COVER LETTER**

TO: Registration Section **Division of Corporations** ONE GLOBAL SEARCH LIMITED LIABILITY COMPANY, LLC SUBJECT: Name of Limited Liability Company The enclosed Articles of Amendment and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: MEZA, CARLOS E Name of Person Firm/Company 1025 MILAN AVENUE Address Coral gables FL 33134 City/State and Zip Code E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Meza, Carlos E Daytime Telephone Number Name of Person Enclosed is a check for the following amount: □ \$30.00 Filing Fee & □ \$60.00 Filing Fee, ■ \$25.00 Filing Fee □ \$55.00 Filing Fee & Certificate of Status Certified Copy Certificate of Status & (additional copy is enclosed) Certified Copy (additional copy is enclosed) MAILING ADDRESS: STREET/COURIER ADDRESS: Registration Section Registration Section

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

## ONE GLOBAL SEARCH LIMITED LIABILITY COMPANY LLC

(Name of the Limited Liability Company as it now appears on our records.)

(A Florida Limited	Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number <u>L14000090642</u> .	were filed on <u>06/05/2014</u>	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	pility company here:	
ONE GLOBAL SEARCH, LLC		
The new name must be distinguishable and contain the words "Limited Liabi	ility Company," the designation "LLC" or	the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	,,,,,	
(Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered o registered agent and/or the new registered office address her	<del>-</del>	nter the name of the nev
		18 80 7411
Name of New Registered Agent:		
New Registered Office Address:		35 P T
	Enter Florida street address	7
	Florid	la <u> </u>
New Registered Agent's Signature, if changing Registered Agent:	City <u>:</u>	Single Si
I hereby accept the appointment as registered agent and agr provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as	v performance of my duties, and $I$	am familiar with and

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 =	<b>Authorized Member</b>

<u>Title</u>	<u>Name</u>	Address	Type of Action
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Page 3 of 3

Filing Fee: \$25.00