# LI40054027

(Re	equestor's Name)	
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(Ci	ty/State/Zip/Phone i	<del>¥</del> )
PICK-UP	☐ WAIT	MAIL
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# **COVER LETTER**

Division of Co					
GLOBA SUBJECT:	AL REAL ESTATE SOL	UTIONS, LLC			
	Name of Limited Liability Company				
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please return all corresp	ondence concerning this matter	to the following:			
	MS. RA`MON BRO	OKS			
		Name of Person			
	GLOBAL REAL ESTATE SOLUTIONS, LLC				
		Firm/Company			
	4252 ACACIA DRIVE				
	**************************************	Address	Address		
	PENSACOLA, FLOI	RIDA 32503		· · · · · · · · · · · · · · · · · · ·	
		City/State and Zip Code	<del>"</del>		
	ramon_brooks@att.r			8	
For further information	E-mail address: ( concerning this matter, please c	to be used for future annual report notifiall:	ication)	28. 28. 29.	
MS. RA`MON BRO	OOKS	850 207-0497		AH 7:	
Name	of Person		Telephone Number	57	
Enclosed is a check for t	the following amount:				
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified (	e of Status &	

MAILING ADDRESS:

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

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle Tallahassee, FL 32301

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

GLOBAL REAL ESTATE SOLUTIONS, 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 $\underline{L14000154027}$ .	were filed on October 02, 2014 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:
The new name must be distinguishable and end with the words "Limited Lia	bility 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)	ZW DEC 16 1
B. If amending the registered agent and/or registered or registered agent and/or the new registered office address her	office address on our records, enter the name of the new
Name of New Registered Agent:	2. Golson ma Duffé
New Registered Office Address:	Enter Florida street address 32503

## 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.

Charleing Registered Agent, Signature of New Registered Agent

Zip Code

Page 1 of 3

If amending the Managers or Authorized Member on our records, <u>enter the title, name, and address of each Manager or Authorized Member being added or removed from our records</u>:

<u>Title</u>	<u>Name</u>	Address	Type of Action
<u></u>	<u></u>	<del>-</del>	Add
		<u> </u>	Remove
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			☐ Remove
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			2814 DEC
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. <del>-</del>	Add FET# 32-0449924
(The effe	ive date, if other than the date of filing:
Dated	December 09, 2014.
	1/5. Rámo & 12
	Signature of a member or authorized representative of a member
	Ms. RA'MON G. Brooks
	Typed or printed name of signee

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Filing Fee: \$25.00

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