



(Requestor's Name)
(Address) (Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) ertified Copies Certificates of Status
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(Business Entity Name)
(Document Number)
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and a bill in act.

2024 HAY 21 AM 2: 53

FILED

COVER LETTER

Division of Co			
Robert Sei	ler LLC		
300JEC1	Name of Lin	nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	Robert Seiler		
		Name of Person	
	Robert Seiler LLC		
		Firm/Company	
	3047 NW 60th St		
		Address	
	Fort Lauderdale, FL 3330	9	
	hobbe Colobalde entre	City/State and Zip Code	
	bobby@globaldmesolution E-mail address:	s.com to be used for future annual report notif	ication)
For further information (concerning this matter, please c	all:	
Robert Seiler		954 366-6396	
Name (of Person	at () Area Code Daytimo	Telephone Number
Enclosed is a check for t	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 Addre	ss:	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

Robert Seiler LLC		
(<u>Name of the Limited Liability Compa</u> (A Florida Limited I	ny as it now appears on our records. Jiability Company)	ζ,
The Articles of Organization for this Limited Liability Company Torida document number £14000191956	were filed on 12/17/2014	and assigned
his amendment is submitted to amend the following:		
. If amending name, enter the new name of the limited liab	ility company here:	
Global DME Solution LLC		
he new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC"	or the abbreviation "L.L.C."
inter new principal offices address, if applicable:		. 2
Principal office address MUST BE A STREET ADDRESS)	3047 NW 60th	024
THE PURISH SHEET AND ALL STREET ADDRESS	Fort Lauderdale, FL 33309	= 1L
	-	21
nter new mailing address, if applicable:		20.00 A
Mailing address MAY BE A POST OFFICE BOX)		70 2
Additional address to the first		
		<u></u>
. If amending the registered agent and/or registered office agent and/or the new registered office address here: Name of New Registered Agent:	address on our records, <u>enter t</u> l	he name of the new registe
Name of New Registered Agent.		
New Registered Office Address:	Enter Florida street address	
	Emer Fioriaa Mreet address	
	, Flor	
	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>	Name	Address	Type of Action
		.	□Add
			□Remove
			Change
			□Add
		□Remove	
			□Change
			□Add
			Remove
			□Change
			□Add
		-	□Remove
			□Change
			□Add
		-	□Remove
			□Change
			□Add
			□Remove
			□Chanve

amending any other into m	ation, enter change(s) here: (Attach additional sheets, if necessary.)	
		—
		_
		_
in effective date is listed, the date mu	e date of filing:	o 605.0207 : listed as
ecord specifies a delayed effective is filed.	ve date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day	after the
May 8 ted	2024	
	Signature of a member or authorized epresentative of a member	_
	Supplied of a member of authorized-triples-marive of a member	
Robert Seiler		

Filing Fee: \$25.00