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## TO: Registration Section Division of Corporations

SUBJECT: GLOBAL IMMIGRATION RECRUITING LLC
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:

DANIEL C. PERRY	
GLOBAL IMMIGRATION RECRUITING	LLC
11135 GOTH TERR NONTH	
SEMINALE FL. 33772	
City/State and Zip Code  Day Peory Cars @ 6 Mail. Com  E-mail address: (to be used for future annual report notification)	

For further information concerning this matter, please call:

DANIEL	c	PERLY	at (727) 410-3033
Name	of Pers	ion	Area Code Daytime Telephone Number

Enclosed is a check for the 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 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 IMMIGRATION RECRUITING 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	were filed on <u>0</u>	3/09/2	015 and	d assigned
Florida document number <u>L15000042906</u>				_
This amendment is submitted to amend the following:			TAL SE	
A. If amending name, enter the new name of the limited liabil	lity company her	<u>e</u> :	CRUTAR LAHASS	PR 20
The new name must be distinguishable and end with the words "Limited Liabil	lity Company," the de	signation "LLC" o	, 44.1	5 - (c - W
Enter new principal offices address, if applicable:			017 118	
(Principal office address MUST BE A STREET ADDRESS)				л Ф
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)	13575 CLEAR	S8TH S WATEN.	st. N. Fl. 3	# 231 3760-372
B. If amending the registered agent and/or registered off registered agent and/or the new registered office address here  Name of New Registered Agent:		our records, <u>e</u>	enter the na	me of the new
Name of New Registered Agent.				<del></del>
New Registered Office Address:	F Fl	a street address		·
	Enter Fioria	a sireei aaaress		
	C:	, Florid		
Name Desistened Assert's Signature if changing Desistened Assert	City		Zip C	ode

### 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 the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = M $AMBR = A$	Janager, uthorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	CANOL J. PERLY	11135 GOTH TERR. N. SEMINOLE FL. 3377	Add
		SEMINOLE FL. 3377	2 □ Remove
•			□ Remove
			15 APR AND PHONE SEE THORIDA
<del></del>			Remove
			SE SE
			□ Add
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ı amendi	ng any other information, enter change(s) here: (Attach additional sheets, if necessary.)	•
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66 actions	date, if other than the date of filing: 04/24/2015 (optional)	
he effective	e date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after	
he date this	s document is filed by the Florida Department of State)	
ated	04-17-2015	
	Signature of a member of authorized representative of a member	·
	DANIEL C PERNY	
	Typed or printed name of signee	
		r UT
		APP
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Page 3 of 3

Filing Fee: \$25.00