

UP0005174

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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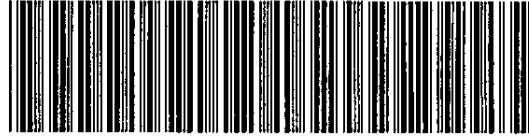
(Business Entity Name)

(Document Number)

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AUG 27 2015

S. YOUNG

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SPARTAN GLOBAL ONE 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:

FRANK PARKER
Name of Person
SPARTAN Global ONE LLC
Firm/Company
7304 Lighthouse Cove
Address
Tequesta, FL. 33469
City/State and Zip Code
Frank@SpartanGlobalOne.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

FRANK PARKER at (914) 523-4433
Name of Person 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

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CORPORATION DIVISION
TALLAHASSEE, FL

SPARTAN GLOBAL ONE LLC

Page 1 of 3

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>	<u>Address</u>	<u>Type of Action</u>
AMBR	Roger Bloat	598 Peppergrass Run	<input type="checkbox"/> Add
		Wellington, FL. 33411	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Frank Parker	7304 Lighthouse Cove	<input checked="" type="checkbox"/> Add
		Tequesta, FL. 33469	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Amber Alstott	23808 Caton Farm Rd	<input checked="" type="checkbox"/> Add
		Plainfield, IL. 60586	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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U.S. DISTRICT COURT
SOUTHERN DISTRICT OF FLORIDA

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

FRANK PARKER — 100 %

E. Effective date, if other than the date of filing: _____ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01-a.m. on the earlier of:
(b) The 90th day after the record is filed.

Dated 8/24, 2015.

Signature of a member or authorized representative of a member

Roger BLOP
Typed or printed name of signee

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