

LS000115499

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

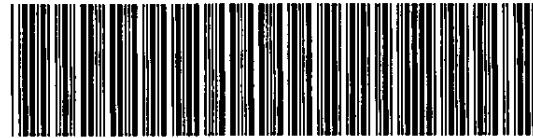
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TALLAHASSEE, FLORIDA

COVER LETTER

TO: **Registration Section**
Division of Corporations

SUBJECT: Global Tactics 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:

Melvin J. Murphy
Name of Person
Global Tactics LLC
Firm/Company
1433 NW 126th Way
Address
Sunrise, FL 33323
City/State and Zip Code
Karatemelvin@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Melvin J. Murphy at 954 325-3556
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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SECRETARY OF FLORIDA
TALLAHASSEE, FLORIDA
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**TO
ARTICLES OF ORGANIZATION
OF**

Global Tactics 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 7-06-2015 and assigned
Florida document number L15000115499.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability 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)

1433 NW 126th Way
Sunrise, FL 33323

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

Florida

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

or removed from our records:

- MGR = Manager
- AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
<u>CEO/Pres</u>	<u>Melvin J. Murphy</u>	<u>1433 NW 126th Way,</u> <u>Sunrise, Fl 33323</u>	<input checked="" type="checkbox"/> Add ^{ungr} <input type="checkbox"/> Remove <input checked="" type="checkbox"/> Change
<u>COO</u>	<u>Samuel Samaroo</u>	<u>5452 NW 108th Way</u> <u>Coral Springs, Fl 33076</u>	<input type="checkbox"/> Add <input type="checkbox"/> Remove <input checked="" type="checkbox"/> Change
<u>MGR</u>	<u>Carmine Tufano</u>	<u>2732 Montridea Ave</u> <u>Cooper City, Fl 33026</u>	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove <input type="checkbox"/> Change
<u>VP</u>	<u>Donald Prichard</u>	<u>6919 W. Broward Blvd</u> <u>Plantation, Fl 33317</u>	<input type="checkbox"/> Add <input type="checkbox"/> Remove <input checked="" type="checkbox"/> Change
<u>VP</u>	<u>Traian Breaban</u>	<u>11800 NW 25th Street</u> <u>Plantation, Fl 33323</u>	<input type="checkbox"/> Add <input type="checkbox"/> Remove <input checked="" type="checkbox"/> Change
<u>VP</u>	<u>Renee Wilborn-Peterson</u>	<u>12330 NW 2nd Street</u> <u>Coral Springs, Fl 33071</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Change

Corporate Shares Percentage of ownership

CEO/Pres: Melvin J. Murphy 22% ownership.

COO: Samuel Samaroo 22% ownership.

VP: Donald Prichard 22% ownership.

VP: Traian Breaban 22% ownership.

VP: Renee Wilborn-Peterson 12% ownership.

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STATE
SECRETARY OF
TALLAHASSEE, FLORIDA
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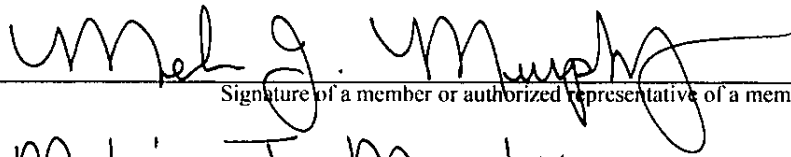
E. Effective date, if other than the date of filing: January 1, 2017 (optional)

(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 12-31, 2016.



Signature of a member or authorized representative of a member

Melvin J. Murphy

Typed or printed name of signee