

L15000125243

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

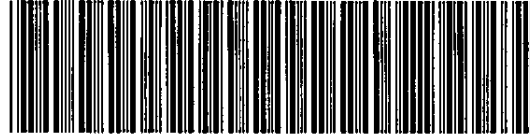
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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2015 DEC -1 A 9:34  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

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3 MASON

November 12, 2015

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

To Whom it May Concern:

Please find enclosed the completed Articles of Amendment form and the \$25 filing fee in regards to the change of address for Global Business Synergies, LLC (Florida Document Number: L15000125243). The new company address is as follows:

Global Business Synergies, LLC  
2525 Ponce de Leon Blvd, Suite 300  
Coral Gables, FL 33134

If you have any questions please either contact me at [rjones@gb synergies.com](mailto:rjones@gb synergies.com) or call David Jones (an Authorized Member) at 301 640-1618.

Thank you for your assistance.

Sincerely,

A handwritten signature in black ink that reads "Robert Jones". The signature is written in a cursive style with a large, stylized "R" and "J".

Robert Jones  
Manager & President  
Global Business Synergies, LLC

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Global Business Synergies  
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:

Robert Jones

Name of Person

Global Business Synergies

Firm/Company

2525 Ponce de Leon Blvd Suite 300

Address

Coral Gables, FL 33134

City/State and Zip Code

rjones@gb synergies.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

David Jones

Name of Person

at ( 301 )

Area Code

640-1618

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 Business Synergies

(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 July 22, 2015 and assigned Florida document number L15000125243.

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)

2525 Ponce de Leon Blvd  
Suite 300  
Coral Gables, FL 33134

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

(same as above)

**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:

n/a

New Registered Office Address:

2525 Ponce de Leon Blvd, Suite 300

Enter Florida street address

Coral Gables

City

Florida

33134

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.*

n/a

**If Changing Registered Agent, Signature of New Registered Agent**

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TALLAHASSEE, FLORIDA

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

N/A

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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TALLAHASSEE, FLORIDA

This image shows a single sheet of white paper with horizontal blue or grey ruling lines. The lines are evenly spaced and run across the width of the page. There are approximately 20 lines visible. At the top left corner, there are some faint, small black marks that appear to be scanning artifacts or dust. The rest of the page is completely blank.

(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)

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.

Robert Jones  
Signature of a member or authorized representative of a member

Robert Jones  
Typed or printed name of signee

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CLERK OF DISTRICT COURT  
TALLAHASSEE, FLORIDA