3.8-23, 3,44 PM

To:

Division of Corporations

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number : (850)617-6333

From:

Account Name : COMPANY COMBO, LLC

Account Number : 120160000033 Phone : (866)428-2030 : (407)308-0481 Fax Number

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:_

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COMPANY COMBO, LLC

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Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

COVER LETTER

TO: Registration S Division of Co			
COMPAN	Y COMBO, LLC		
SUBJECT:	Name of Lim	ited Liability Company	·
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspondent	ondence concerning this matter	to the following:	
	NICOLE A.		
		Name of Person	
	GLOBALFY BUSINESS	SERVICES, LLC	
		Firm/Company	· · · · · · · · · · · · · · · · · · ·
	7345 W SAND LAKE RD	STE 210	
		Address	
	ORLANDO, FL 32819		
		City/State and Zip Code	
	DOCS@GLOBALTY.CON		<u></u> .
	E-mail address: t	to be used for future annual report no	orification)
For further information of	concerning this matter, please ca	all:	
NICOLE A.		866 428-2030	
Name (of Person	at ()	ine 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)	S60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
<u>MailiagAddre</u> Registration Division of C	Section Torporations	<u>StreetAddress:</u> Registration S Division of C	orporations
P.O. Box 6327		The Centre of	Tallahassee

īa:

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

COMPANY COMBO, LLC		
(<u>Name of the Limited Liabili</u> (A Florid	ity Company as it now appears on our real Elimited Liability Company)	cords.)
The Articles of Organization for this Limited Liability C	Company were filed on 08/26/2015	and assigned
Florida document number L15000146758	<u></u> ,	
This amendment is submitted to amend the following:		
A. If amending name, <u>enter the new name of the lim</u>	ited liability company here:	
GLOBALFY BUSINESS SERVICES, LLC		
The new name must be distinguishable and contain the words "Lin	nited 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 ADDI	RESS)	
Enter new mailing address, if applicable:	-	· · · · · · · · · · · · · · · · · · ·
(Mailing address MAY BE A POST OFFICE BOX)		<u>. </u>
	<u></u>	
B. If amending the registered agent and/or registered	d office address on our records. <u>en</u>	ter the name of the new registe
agent and/or the new registered office address here:		
Name of New Registered Agent:		<u> </u>
New Registered Office Address:	5 40 11	20:3
	Later Florada street ad	dress
	Civ-	Florida
New Registered Agent's Signature, if changing Registere	vay d Avent:	I further agree to comply with t
I hereby accept the appointment as registered agent	37.7.2.7.7.7	

I hereby accept the appointment as registered agent and agree to act in this copacity. 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 affice address. I hereby confirm that the limited liability company has been notified in writing of this change.

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

To:

<u>Title</u>	Name	Address	Type of Action
			🗀 Add
			□Remove
			□Change
			□Add
			□Remove
			□Add
		- 11 - 1 - 1	□Remove
			□Remove
			□Add
			□Remove
			□Change
			□Add
			Remove
			—

		
		
 		
		- · · ·
		_
E. Effective date, if other than the	late of filing:	
(If an effective date is listed, the date mus <u>Note:</u> If the date inserted in this blo document's effective date on the Do	ck does not meet the applicable statutory filing requirements, this date will not be	i 605,0207 (330) Historias the
f the record specifies a delayed effective ecord is filed	date, but not an effective time, at 12:01 a.m. on the earlier of (h). The 90th day	after the
Dated MARCH 8	2023	
	رقي	
	Signature of a member or authorized representative of a member	_
EVANEIDE PALATIN	KY DE SAMPAIO	
	Typed or printed name of signee	_

2023-03-08 18:49:39 GMT

14073080481

From: Diego Sampaio

To:

Page: 6 of 6

Filing Fee: \$25.00