16000056924

(Re	questor's Name)	
(Ad	dress)	
(Add	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu:	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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COVER LETTER

TO: §	Registration Se Division of Co	ection rporations		`
aun in a	GLOBALS	SHOPPING 0803, LLC		•
SUBJEC	r:	Name of Lim	ited Liability Company	
	٠	Amendment and fee(s) are sub	-	
		Luis Ernesto Lopez Cav	alieri	
		Globalshopping 0803, Ll	Name of Person LC	· <u>······</u>
		1896 Fox Ct	Firm/Company	
		Wellington, FI 33414	Address	
		globalshoppingve@gmail	City/State and Zip Code	
		E-mail address: (to be used for future annual report notiff	ication)
For furthe	r information o	concerning this matter, please ca	all:	
Luis Erne	esto Lopez Ca	avalieri	561 8435525	
-	Name o	f Person	Area Code Daytime	Telephone Number
Enclosed	is a check for th	he following amount:		
□∕\$ 25.0	0 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

Globalshopping 0803, LLC			
(Name of the Limit	ted Linbility Company as it now a (A Florida Limited Liability Comp	opears on our records.) any)	
he Articles of Organization for this Limited L	iability Company were filed o	on 03/22/2016 and ass	igned
orida document number L16000056924	·		
his amendment is submitted to amend the follo	owing:		
. If amending name, enter the new name o	f the limited liability compar	ny here:	
he new name must be distinguishable and contain the w	vords "Limited Liability Company,"	the designation "LLC" or the abbreviation "L.	L.C."
nter new principal offices address, if applic	able:	201	
Principal office address MUST BE A STREET ADDRESS)			टक्स मुख्य <u>े</u>
		<u> </u>	FEE: -4
		A AS	1
nter new mailing address, if applicable:		C PA	- E g
Mailing address MAY BE A POST OFFICE BOX)		<u> </u>	-
Adding Bodiess WAT BE AT OST OFFICE	<u></u>	<u> </u>	
. If amending the registered agent and/ registered agent and/or the new registered of Name of New Registered Agent:		ss on our records, enter the name	<u>of the</u>
	1896 Fox Ct		
New Registered Office Address:		er Florida street address	
	Wellington		
		Florida ³³⁴¹⁴	

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 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 Mer	nber

<u>Title</u>	<u>Name</u>	Address	Type of Action
			Remove
		 	
			□ Add
			□ Remove
			Change
			Add
			Remove
			Change
			□ Add
			Remove
			☐ Change
			🗆 Add
			☐ Change
			Remove
			☐ Change

<u> </u>			
			
			
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Note: If the date inserted	han the date of filing: date must be specific and cannot be print this block does not meet the applicant the Department of State's record	(optional) or to date of filing or more than 90 days after filing icable statutory filing requirements, this date is.) µ) Pursuant to 605.0207 will not be listed as
the record specifies a control The 90th day after	delayed effective date, but r the record is filed.	not an effective time, at 12:01 a.m.	on the earlier o
09/26/2019 Dated		A	
Dated		128/2	
		-1111 - Into 22 ()	

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00