

*L1160000 76927*

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(Requestor's Name)

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(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

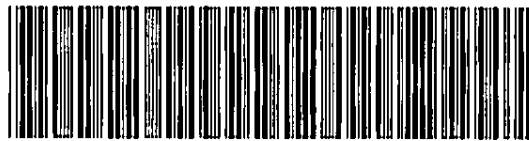
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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SEP 29 2020

S. YOUNG

DEPT. OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

2020 AUG 10 PM 5:41

FILED

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** GLOBAL REINSURANCE BROKER OF FLORIDA, 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:

Denis Fishman, Esq.

\_\_\_\_\_  
Name of Person

Denis Fishman, P.A.

\_\_\_\_\_  
Firm/Company

1920 E. Hallandale Beach Blvd., Ste. PH8

\_\_\_\_\_  
Address

Hallandale Beach, FL 33009

\_\_\_\_\_  
City/State and Zip Code

df@denisfishman.com

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

For further information concerning this matter, please call:

Denis Fishman

305 931-9355  
at ( )

\_\_\_\_\_  
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 Address:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

GLOBAL REINSURANCE BROKER OF FLORIDA, LLC

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

**FILED**  
2020 AUG 10 PM 5:41  
CLERK OF CIRCUIT COURT  
JUDICIAL CIRCUIT IN AND FOR  
THE COUNTY OF DADE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 04/19/2016

Florida document number L16000076927

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:

8884 SW 129 Terrace

**(Principal office address MUST BE A STREET ADDRESS)**

Miami, Florida 33176

Enter new mailing address, if applicable:

8884 SW 129 Terrace

**(Mailing address MAY BE A POST OFFICE BOX)**

Miami, Florida 33176

**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:

Denis Fishman, Esq.

New Registered Office Address:

1920 E. Hallandale Beach Blvd., Ste. PH8

*Enter Florida street address*

Hallandale Beach

Florida 33009

*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**

**MGR = Manager**  
**AMBR = Authorized Member**


[illegible]

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(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.

Dated July 17 2020

y 17 \_\_\_\_\_ 2020 \_\_\_\_\_  
  
 \_\_\_\_\_  
 Signature of a member or authorized representative of a member

Typed or printed name of signee

**Filing Fee: \$25.00**