L14000107249

(Re	questor's Name)	
(Address)		
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
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08/29/16--01026--011 **35.00

TARENTA STATE STATE

J. HARRIS

COVER LETTER

TO:	Registration Section Division of Corporations					
SUBJE	CT: MARKET SWOFE GLOBAL, LLC Name of Limited Liability Company					
The enc	losed Articles of Amendment and fee(s) are submitted for filing.					
Please r	eturn all correspondence concerning this matter to the following:					
	Name of Person					
	MARKET SCOPE GLOBAL, LLC Firm/Company					
7734 SW 14th COURT						
	City/State and Zip Code MISCOPE & belsouthones E-mail address: (to be used for future annual report notification)					
For furt	her information concerning this matter, please call:					
	Day LEW 15 at (2005) 365-1542 Name of Person Area Code Daytime Telephone Number					
Enclose	ed is a check for the following amount:					
□ \$25	Certificate of Status Certified Copy (additional copy is enclosed) \$60.00 Filing Fee, Certified Copy (additional copy is enclosed) \$60.00 Filing Fee, 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

FLORIDA DEPARTMENT OF STATE Division of Corporations

September 7, 2016

JAY LEWIS 7734 SW 146TH COURT MIAMI, FL 33183

SUBJECT: MARKETSCOPE GLOBAL LLC

Ref. Number: L16000107249

Ally Set 50 kg lines

We have received your document for MARKETSCOPE GLOBAL LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a FORIEGN CORPORATION, but your entity is a FLORIDA LLC. Please complete and return the enclosed blank form(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Jenna D Harris Regulatory Specialist II

Letter Number: 316A00018793

16 SEP 20 PH 2: 12

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited L.	7 Su	OPE GLOP	AL, LLC	•		
(Name of the Limited L. (A F	lorida Limited	Liability Company)	on our records.			
The Articles of Organization for this Limited Liabil Florida document number <u>ししのの</u> し	ity Company	were filed on <u>\$</u>	12/20	16	and ass	igned
This amendment is submitted to amend the following	ng:					
A. If amending name, enter the new name of the	limited lial	oility company her	<u>·e</u> :			
The new name must be distinguishable and contain the words	OPE	GWBA	TECHNO)L06	1165	LLC
The new name must be distinguishable and contain the words	"Limited Liab	ility Company," the des	signation "LLC" or t	the abbrevia	ition "L.	ĽC."
Enter new principal offices address, if applicable	: :	N/A				
(Principal office address MUST BE A STREET A	DDRESS)					
					<u></u>	 ,
Enter new mailing address, if applicable:		N/V		- 62 - 62 - 62	SEP :	
(Mailing address MAY BE A POST OFFICE BO.	<u>X)</u>		· 	ু ;স -	<u> </u>	
				- 10	2	· · · · · · · · · · · · · · · · · · ·
B. If amending the registered agent and/or registered agent and/or the new registered office			our records, <u>er</u>	nter the	••	of the new
Name of New Registered Agent:	NIA					
New Registered Office Address:					,	
		Enter Florid	da street address			•
-		Cim	, Florid	a	ip Code	
		City		Z.	p Coae	

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 = Ma AMBR = Au	nager thorized Member				
Title	Name	Address	Type of Action		
Mary	- 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	77795014607	🗆 Add		
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			_□ 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:

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ffective date, if other than the date of filing: an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days ote: If the date inserted in this block does not meet the applicable statutory filing requirements occument's effective date on the Department of State's records.	optional) s after filing.) Pursu s, this date will n	uant to 60 ot be lis)5.020 sted a
e record specifies a delayed effective date, but not an effective time, at 12: The 90th day after the record is filed.	01 a.m. on th	ne earl	ier
$\frac{9/16/2016}{}$			
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		3	
Signature of a member or authorized representative of a member		259	
10.01 + 11/16	; ;-,		
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Typed or printed name of signee	S FAT	$\ddot{\omega}$	1

Page 3 of 3

Filing Fee: \$25.00