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(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	-
(Cit	ty/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	





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DEC 15 2017 Y &ULKER



December 7, 2017

MARIA ESTRELLA PO BOX 121 APOPKA, FL 32703

SUBJECT: GLOBAL LINK TRANSPORTATION LLC

Ref. Number: L16000186846

We have received your document for GLOBAL LINK TRANSPORTATION LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

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.

Letter Number: 617A00024771

Yasemin Y Sulker Regulatory Specialist II

www.sunbiz.org

COVER LETTER

Div	ision of Cor	porations		
SUBJECT:	GLOBAL I	.INK TRANSPORTATION I	LC	
			nited Liability Company	
The enclosed	Articles of	Amendment and fee(s) are sul	bmitted for filing.	
Please return	all correspo	ndence concerning this matter	to the following:	
		MARIA ESTRELLA		
			Name of Person	
		~-	Firm/Company	
		PO BOX 121		
			Address	
		APOPKA FL 32703		
			City/State and Zip Code	
		MESTRELLA7214@GMA	AIL.COM	
		E-mail address: (to be used for future annual report no	tification)
For further in	formation co	ncerning this matter, please c	all:	
MARIA EST			845 461-6140	
	Name of	Person	at () Area Code Daytii	ne Telephone Number
Enclosed is a	check for the	e following amount:		
■ \$25.00 Fi	ling 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)

TO:

Registration Section

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 LINK TRANSPORTATION LLC		
(<u>Name of the Limited Liability Compa</u> (A Florida Limited	ny as it now appears on our records.) Liability Company)	
Articles of Organization for this Limited Liability Company were filed on $\frac{10/10/2016}{}$ and a rida document number $\frac{L16000186846}{}$		and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
he new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or th	e abbreviation "L.L.C."
Enter new principal offices address, if applicable:	615 VINE CT	
Principal office address MUST BE A STREET ADDRESS)	APOPKA FL 32703	
Enter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE BOX)		17
3. If amending the registered agent and/or registered of egistered agent and/or the new registered office address here	Tice address on our records, ent	er the name of the ne
Name of New Registered Agent:		FLERIO E
		2
New Registered Office Address:	Enter Florida street address	
	, Florida	
	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

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

<u>Name</u>	<u>Address</u>	Type of Action
MANUEL CRISOSTOMO	525 S CONWAY RD APT 152	
	ORLANDO FL 32807	■ Remove
		☐ Change
MARIA ESTRELLA	615 VINE CT	
	APOPKA FL 32703	☐ Remove
		■ Change
		Remove
		Change
		Add
		Remove
		ASSEE FLORIDA
		Change
		□ Add
		□ Remove
	MANUEL CRISOSTOMO	MARIA ESTRELLA 525 S CONWAY RD APT 152 ORLANDO FL 32807 MARIA ESTRELLA 615 VINE CT

Registerd agent is the same and the mailing address as we	ell.
	····
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	STA:
-	>
tive date, if other than the date of filing:	(optional)
ffective date is listed, the date must be specific and cannot be prior to: If the date inserted in this block does not meet the applicab	o date of filing or more than 90 days after filing) Pursuant to 605 t
ment's effective date on the Department of State's records.	ore statutory thing requirements, this date will not be listed
ecord specifies a delayed effective date, but not e 90th day after the record is filed.	an effective time, at 12:01 a.m. on the earlier
NOW MUNITO 167	
NOVEMEBER 1ST 2017	- '
into a fortila	1.
Signature of a member or authori	~

Page 3 of 3

Filing Fee: \$25.00