

**L17000024954**

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

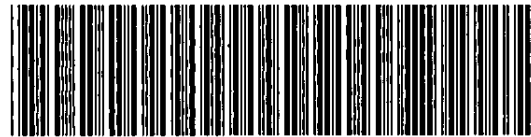
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



500299820765

06/07/17--01012--013 \*\*2

FILED  
2017 JUN -7 PM 3:52  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

K. SALY

JUN - 8 2017



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

April 26, 2017

MIGUEL A TORRES PEREZ  
2950 W CYPRESS CREEK RD STE 104  
FT LAUDERDALE, FL 33309

SUBJECT: GLOBAL DATA MANAGEMENT GROUP LLC  
Ref. Number: L17000024954

We have received your document for GLOBAL DATA MANAGEMENT GROUP 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):

We are enclosing the proper form(s) with instructions for your convenience.

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.

Yasemin Y Sulker  
Regulatory Specialist II

Letter Number: 417A00008138

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Global Data Management Group 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:

Miguel Torres Perez  
Name of Person

Global Data Management Group LLC  
Firm/Company

2950 W Cypress Creek Road Ste 104  
Address

Fort Lauderdale, FL 33309  
City/State and Zip Code

MiguelTorresPerez@outlook.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Miguel Torres Perez at ( 561 ) 325-2893  
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- |  |  |  |  |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(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**

Global Data Management Group LLC  
(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

**FILED**  
2017 JUN -7 PM 3:52  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 1/31/17 and assigned  
Florida document number 417000024954.

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:**

(Principal office address MUST BE A STREET ADDRESS)

**Enter new mailing address, if applicable:**

(Mailing address MAY BE A POST OFFICE BOX)

**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:

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>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
--------------	-------------	----------------	-----------------------

MGR	Nicholas Daniel Rodriguez	2346 SE 16 <sup>th</sup> Terrace, Homestead, FL 33035	<input checked="" type="checkbox"/> Add
-----	---------------------------	---	---

☐ Remove

☐ Change

MGR	Taylor McClain Weil	2030 Alta Meadows Lane Apt 1207 Delray Beach, FL 33444	<input type="checkbox"/> Add
-----	---------------------	---	------------------------------

☒ Remove

☐ Change

MGR	Oscar Rodriguez		<input type="checkbox"/> Add
-----	-----------------	--	------------------------------

2950 W Cypress Creek Road Ste 109  
Ft. Lauderdale, FL 33309

☐ Change

☐ Add

☐ Remove

☐ Change

☐ Remove

☐ Change

☐ Add

☐ Remove

☐ Change

2017 JUN - 7 PM 3:52  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

2017 JUN -7 PM 3:38  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED  
2017 JUN -7 PM 3:52  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**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 June 5, 2017.

Miguel Torres Perez  
Typed or printed name of signee