## L1700020635L

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## **COVER LETTER**

TO: Registration S Division of Co			
GLOBAL SUBJECT:	GROUP 1234321 LLC		
SUBJECT:	Name of Lir	nited Liability Company	<del></del>
		·	
The enclosed Articles of	f Amendment and fee(s) are sul	bmitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	WASSERSZTEIN, ALEJ	ANDRO D	
	-	Name of Person	<del></del>
	GLOBAL GROUP 12343	21 LLC	
		Firm/Company	
	2453 Greenbrier Court		
		Address	
	Weston, FL 33327	·	
		City/State and Zip Code	<del></del>
	mail@1234321.net		
For further information of	f:-mail address: ( concerning this matter, please c	to be used for future annual report not all:	afication)
WASSERSZTEIN, ALE	JANDRO D	954 2133404	
Name (	of Person	at ()	ne Telephone Number
Enclosed is a check for t	he 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 Addres		<u>Street Address:</u> Registration Se	ection
Registration Section Division of Corporations		Division of Co	
P.O. Box 632		The Centre of T	Fallahassee
Tallahassee, l	rL 32314	2415 N. Monro	e Street, Suite 810

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

GLOBAL GROUP 1234321 LLC	ine as it not appropriate an one second	
(Name of the Limited Liability Compa (A Florida Limited	his as a now appears on our records Liability Company)	<u>v.</u> )
The Articles of Organization for this Limited Liability Company	were filed on 5/5/2021	and assigned
lorida document number L17000206356		
his amendment is submitted to amend the following:	•	
If amending name, enter the new name of the limited liab	ility company here:	2021 HA
he new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC"	or the abbreviation_LL_C."
		0
nter new principal offices address, if applicable:		·
Principal office address MUST BE A STREET ADDRESS)	<del></del>	
		23.38
nter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		
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If any adding the project of the state of th		
. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, <u>enter t</u>	the name of the new regi
www.or the new registered write address nere.		
N CN D L		
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	Fla	rida
	City	Zw 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 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>	Name	Address	Type of Action
MGR	Quiroga, Luz Nidia	9150 Whistable Walk Tamarac, FL 33321	□Add
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