## L18000 258 496

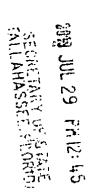
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## **COVER LETTER**

Registration Section

**Division of Corporations** 

TO:

GLAMSY SUBJECT:	GROUP LLC.		
SUBJECT:	Name of Lin	nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	ر مارد مرابع در بازد
Please return all correspo	ondence concerning this matter	to the following:	
	YVETTE RASHID		
		Name of Person	
	UNIVERSAL ACCOUNT	ING & FINANCIAL SERVICES	INC
		Firm/Company	
	2691 E OAKLAND PARI	C BLVD SUITE 302	
		Address	
	FORT LAUDERDALE, F	L 33306	
	info@universalaccountingf	City/State and Zip Code	<del></del>
	-	to be used for future annual report not	ilication)
For further information of	oncerning this matter, please c	all:	
YVETTE RASHID		954 728-8982	
Name o	f Person	at () Area Code Daytin	ne Telephone Number
Enclosed is a check for the	ne 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)
Registr Divisio P.O. Be	ING ADDRESS: ration Section on of Corporations ox 6327 assec, FL 32314	STREET/COUR Registration Section Division of Corpo Clifton Building 2661 Executive Co	on rations

Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

GLAMSY GROUP LLC

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

			`-	Rich Co
The Articles of Organization for this Limited Lia	ability Company v	were filed on $\frac{11/05/201}{}$	8	<u>်ပို့</u> က်d.assi <b>g</b> ရှိed
Florida document number L18000258496	·			
This amendment is submitted to amend the follow	wing:			(3) to
A. If amending name, enter the new name of	the limited liabil	lity company here:		
The new name must be distinguishable and contain the wo	ords "Limited Liabili	ty Company." the designation	on "LLC" or the abb	previation "L.L.C."
Enter new principal offices address, if applica	ıble:			
(Principal office address MUST BE A STREET	T ADDRESS)			
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE B	3 <i>0X</i> )			
	<del></del>			··-
B. If amending the registered agent and/o registered agent and/or the new registered off			records, <u>enter (</u>	the name of the ne
Name of New Registered Agent:				
New Registered Office Address:				
the wite given by the fitting of the		Enter Florida stree	a address	
	, Florida			
		City		Zip Code
New Registered Agent's Signature, if changing Re	egistered Agent:			
I hereby accept the appointment as registered provisions of all statutes relative to the proper accept the obligations of my position as regist being filed to merely reflect a change in the recompany has been notified in writing of this c	r and complete p tered agent as p egistered office o	performance of my du rovided for in Chapter	ties, and I am fa r 605, F.S. Or, i	uniliar with and If this document is

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 adde or removed from our records:

## MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
AMBR	LIS LOZANO, GUSTAVO ADOLFO	2691 E OAKLAND PARK BLVD	_
		SUITE 302	
		30111, 302	□ Remove
		FORT LAUDERDALE, FL 33306	U Kellove
AMBR	MEDINA TOBON, AUDREY VANESSA	2691 E OAKLAND PARK BLVD	□ Add
		SUITE 302	
			□ Remove
		FORT LAUDERDALE, FL 33306	
MGR	GLAMSY GROUP, S.A.	RESIDENTIAL HACIENDA PACIFICA ETAPA 1 #3A	□ Add
	<del></del>	SAN CARLOS, PA NONE PA	
			■ Remove
			Change
		<del></del>	
			□ Remove
		<del></del>	☐ Change
	<del>_</del>	<u> </u>	
			□ Remove
			Change
			Add
			□ Remove
			Change

	Anadia dution to charactit.
	Amending Articles to charge Title of Managus to Authorized members for
_	1- Gustavo Mr. Lozano
_	2- Audrey Medica Tobon
2	Amerdina articles to remove Manager Glamsy Grap S.A.
-	
_	
_	
_	
_	
(If an effe <u>Note:</u>	we date, if other than the date of filing:
	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: 90th day after the record is filed.
Dated _	Custavo A Liz Lozand Signature of a member or authorized representative of a member
	Signature of a member or authorized representative of a member  GUSTAVO ADOLFO LIS LOZANO
	Typed or printed name of signee

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Page 3 of 3

Filing Fee: \$25.00