Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6393

From:

Account Name : US CONTADOR INC Account Number : 120200000121 Phone : (770)928-2700 Fax Number : (888)772-8108

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address:

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## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN GLOBAL INMATES CONNECTION SERVICES LLC

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Corporate Filing Menu

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### 2020-09-09 18:03:38 (GMT) **H20000313345 3**

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

ORGANIZATIO

(Name of the Limit	ed Liability Compar (A Florida Limited L	ny as it now appears on a liability Company)	our records.)	
The Articles of Organization for this Limited Li	ability Company	were filed on 11/13/2	018 and assigned	
Florida document number L18000264721	·			
This amendment is submitted to amend the follo	owing:			
A. If amending name, enter the new name o	the limited liabi	ility company here:		
The new name must be distinguishable and contain the v	vords "Limited Liabil	lity Company," the design	nation "LLC" or the abbreviation "L.L.C."	
		6200 METROWEST		
Enter new principal offices address, if applic <i>Principal office address MUST BE A STREE</i>		ORLANDO, FL 328	35 <u>S</u>	
			SEb :-	
Enter new mailing address, if applicable:			-	
Mailing address MAY BE A POST OFFICE	BOX)		, 11	
			<u> </u>	
B. If amending the registered agent and	l/or registered o	office address on ou	Œ	
registered agent and/or the new registered of	ffice address her	<u>re</u> :		
Name of New Registered Agent:	CONTADOR	RA LLC		
New Registered Office Address:	6200 METROWEST BLVD STE 201-D			
TAEM VARISTATION OF LIVE COUNTYS		Enter Florida	street address	
	ORLANDO		, Florida <sup>32835</sup>	
		City	Zip Cnde	

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

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## 2020-09-09 18:03:38 (GMT) **H20000313345 3**

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	CORDOBA MILLAN-PEPPER, NORMY	1022 HOE AVE APT 5A	
		BRONX, NY 10459	☐ Remove
			☐ Change
<del>,</del>			
			□ Remove
			☐ Change
			D Add
			□ Remove
			□ Change
		,	□ Add
			Remove
			☐ Change
			D Add
			☐ Remove
			O Change
			D Add
			☐ Remove
			Change

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Effect	ive date, if other than the date of filing:
Note:	ective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.1 If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed ent's effective date on the Department of State's records.
ie re The	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlie 90th day after the record is filed.
<b>Date</b> d	SEPTEMBER 8TH , 2020
	Signature of a member or authorized representative of a member

Page 3 of 3

Typed or printed name of signee