18000275497

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Y SULKER JAN 0 0 2022 (850) 524-5437 (850) 524-6243 PLEASE USE FUNDS FROM ACCT: 120210000160 **AMOUNT:25,00 Authorized Signature:** GAVI GLOBAL RESOURCES, LLC L18000275497 **Business Name Document Number** ___ Certified copy of articles of incorporation Pick up time __ Certificate of Status Will wait **AMMENDMENTS NEW FILINGS** ___Profit X Amendment Resignation of R.A. _Not for Profit Officer/Director __Limited Liability Change of Registered Agent Dissolution/Withdrawal Domestication Merger **CONVERSION** Correction CORP **REGISTERATION/QUALIFICATIONS OTHER FILINGS** Annual Report Foreign filing __Limited Partnership Reinstatement Fictitious Name Declaration __ APOSTIL () Other Country

FLORIDA CAPITAL COURIER SERVICES, INC.

2330 CLARE DRIVE

TALLAHASSEE, FL 32309

EXAMINER'S INITIALS:

COVER LETTER

TO:

Tallahassee, FL 32314

	Registration Se Division of Cor			
SHELLC	GAVIGLO	BAL RESOURCES, LLC		
SUBJEC	1,	Name of Lim	ited Liability Company	
The enclo	osed Articles of .	Amendment and fee(s) are sub-	mitted for filing.	
Please ret	turn all correspo	ndence concerning this matter	to the following:	
		Alessandro Del Stabile		
			Name of Person	, , , , , , , , , , , , , , , , , , ,
		 	Firm/Company	
		1840 Jefferson Ave #303		
			Address	
		Miami Beach, FL 33139		
			City/State and Zip Code	
		E-mail address: (to be used for future annual report n	otification)
For furthe	er information c	oncerning this matter, please ca	all:	
Alessand	lro Del tabile		305 5032804	
	Name o	f Person	at () Area Code Dayt	ime Telephone Number
Enclosed	is a check for th	ne following amount:		
■ \$25.0	00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
•	Mailing Addres		Street Address:	
	Registration S Division of C		Registration S Division of C	
	P.O. Box 632		The Centre of	•

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

GAVI GLOBAL RESOURCES, LLC			
(<u>Name of the Limited Liability</u> (A Florida)	Y Company as it now appears Limited Liability Company)	on our records.)	
he Articles of Organization for this Limited Liability Co	ompany were filed on 11/2	8/2018	and assigned
lorida document number L18000275497	_•		
his amendment is submitted to amend the following:			
. If amending name, enter the new name of the limit	ed liability company her	<u>e</u> :	
he new name must be distinguishable and contain the words "Limit	ted Liability Company," the des	ignation "LLC" or the abb	reviation "L.L.C."
inter new principal offices address, if applicable:	1840 Jefferson A	ve #303,	
Principal office address MUST BE A STREET ADDRI	ESS) Miami Beach, Fl.	33139	
			021
Enter new mailing address, if applicable:	same as principal	address	DEC 29
Mailing address MAY BE A POST OFFICE BOX)		<u> </u>	
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		<u>ب</u> : ب	26
3. If amending the registered agent and/or registered agent and/or the new registered office address here:	office address on our rec	cords, <u>enter the name</u>	of the new regis
Name of New Registered Agent: Costanz	za Barducci		
New Registered Office Address: 100 Bis	scayne Blvd suite 1114		
	Enter Floric	la street address	
Mami		, Florida <u>3310</u>	32
	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.

Huir Cothung Barduck

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>	Address	Type of Action
MGR	DEL STABILE, ALESSANDRO	4000 TOWERSIDE TERRACE	□Add
		ΑΡΓ 2112MIAMI, FL 33138	≣Remove
			□Change
			□Add
			□ Remove
			□Change
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ffective date, if other than the dian effective date is listed, the date must botoe: If the date inserted in this blococument's effective date on the Dep	be specific and cannot be prior to c ck does not meet the applicable	date of filing or more than 90 date e statutory filing requirement	_(optional) ays after filing.) Pursuant to 605.0207 ats, this date will not be listed as
		e at 12:01 a.m. on the earlie	r of: (b) The 90th day after the
	date, but not an effective time	,	Total (b) The following when the
is filed.	date, but not an effective time		Tor. (b) The 70m day ther the
December 29	2021		
Pated			