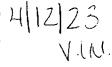
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(Re	equestor's Name)	
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PICK-UP	WAIT	MAIL
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Certified Copies	Certificates of	Status
Special Instructions to	Filing Officer:	
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Office Use Only





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FLORIDA DEPARTMENT OF STATE Division of Corporations

March 3, 2023

JOSUE PENA 2915 BISCAYNE BLVD., SUITE 300 MIAMI, FL 33137, US

SUBJECT GLOBALICEO, LLC. Ref. Number L19000004875

We have received your document and check(s) totaling \$90.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The registered agent must sign accepting the designation.

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) 245-6050.

Vonterica S Williams REGULATORY SPECIALIST II

Letter Number: 123A00005040

COVER LETTER

Division of Co	rporations		
Global CE	O LLC		
SUBJECT:	Name of Lim	ited Liability Company	-
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Josue Pena		
		Name of Person	
	Name of Limited Liability Company ed Articles of Amendment and fee(s) are submitted for filing. m all correspondence concerning this matter to the following: Josue Pena Name of Person Global CEO LLC Firm/Company 2915 Biscayne Blvd Suite 300 Address Miami, FL 33137 City/State and Zip Code jp@onlineceos.com E-mail address: (to be used for future annual report notification) information concerning this matter, please call: 1765 3865939 Name of Person Name of Person Daytime Telephone Number		
		Firm/Company	
	Name of Limited Liability Company Articles of Armendment and fee(s) are submitted for filing. Il correspondence concerning this matter to the following: Josue Pena Name of Person Global CEO LLC Firm/Company 2915 Biscayne Blvd Suite 300 Address Miami, FL 33137 City/State and Zip Code jp@onlineceos.com E-mail address: (to be used for future annual report notification) ormation concerning this matter, please call: Area Code Daytime Telephone Number heck for the following amount: ing Fee \$30.00 Filing Fee & Certified Copy (additional copy is enclosed) Certified Copy Certified Copy (additional copy is enclosed)		
	-	Address	
	Miami, FL 33137		
		City/State and Zip Code	·
	jp@onlineceos.com		
	E-mail address: (to be used for future annual report notif	ication)
For further information c	concerning this matter, please c	all:	
Josue Pena			
Name o	of Person	Area Code Daytime	Telephone Number
Enclosed is a check for the	he following amount:		
□ \$25.00 Filing Fee		Certified Copy	Certificate of Status & Certified Copy

Mailing Address:

TO:

Registration Section

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Global CEO LLC			_	
(Name of the Lim	ited Liability Compa (A Florida Limited	ny as it now appears on our Liability Company)	records.)	
The Articles of Organization for this Limited I	Liability Compалу	were filed on 01/02/2019		and assigned
Florida document number L19000004875	,			
This amendment is submitted to amend the fol	lowing:			
A. If amending name, enter the new name	of the limited liab	ility company here:		
Escaler LLC				
The new name must be distinguishable and contain the	words "Limited Liabi	lity Company," the designation	n "LLC" or the abbrev	viation "L.L.C."
Enter new principal offices address, if appli	cable:	2915 Biscayne Blvd.	TAGE TAGE	23
Principal office address MUST BE A STREET ADDR		Suite 300		
		Miami, FL 33137	[]	<u> </u>
Enter new mailing address, if applicable:		2915 Biscayne Blvd.	OF STA	AM 10: 0
Enter new mailing address, it applicable: (Mailing address MAY BE A POST OFFICE BOX)		Suite 300	-	9
		Miami, FL 33137		
3. If amending the registered agent and/or gent and/or the new registered office address Name of New Registered Agent:	ess here:		enter the name o	f the new regis
	18503 Pines Rlva	d Suite 310		
New Registered Office Address:	Applicable: Suite 300 Miami, FL 33137 Suite 300 Miami, FL 33137 Suite 300 FICE BOX) Miami, FL 33137 Miami, FL 33137			
	Pembroke Pines		Florida <u>33029</u>	
		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>	Address	Type of Action
AMBR	ROKA Technology Group LLC	1309 Coffeen Avenue, Suite 1200	≣ Add
		Sheridan, WY 82801	□ Remove
			□ Change
MGR Josue Pena	2915 Biscayne Blvd., Suite 300		
		Miami, FL 33137	
			□Change
AMBR Josue Pena	3632 RED RD		
		MIRAMAR, FL 33025	
			□Change
			□Add
			□Remove
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Facti	date, if other than the date of filing: (optional)	
an effe ote:	ive date, if other than the date of filing:	505.0207 isted as
record is fil	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day a	fter the
ated _	Sovember 30 2022 Jan Jan	

Typed or printed name of signee