L 19 0000 46741

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COVER LETTER

TO: Registration Sec Division of Corp			
subject: <u>Possi</u> e	el Internationa Name of Limit	L Network, L	
The enclosed Articles of A	Amendment and fee(s) are subm	nitted for filing.	
Please return all correspor	ndence concerning this matter t	o the following:	
	Christina Po	SSiel Name of Person	
	AmeriShine	Firm/Company	<u> </u>
	528 Zebra Dr	Address	
	North Fort M	yers FL - 33 ^C City/State and Zip Code	117
	amerishine E-mail address: (to	o be used for future annual repo	rt notification)
For further information co	oncerning this matter, please ca	II:	
Christina T	Person	at (<u>339</u>) <u>20</u> Area Code D	3 1415 aytime Telephone Number
Enclosed is a check for the	e following amount:		
★ \$25,00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy tadditional copy is enclosed	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

Mailing Address:
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

ARTICLES OF O	ORGANIZATION 🛁
O	F
Possiel International Us (Name of the Limited Liability Compa (A Florida Limited I	2+Work LLC ny as it now appears on our records.) Liability Company)
The Articles of Organization for this Limited Liability Company Florida document number <u>L 19 0000 46741</u> .	were filed on $2/15/2019$ and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	ility company here:
Global Frost, LLC The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "L.L.C." or the abbreviation "L.L.C."
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	13300 South Cleveland Ave. Ste 56, #818 Fort Myers, FL - 33907
Enter new mailing address, if applicable:	528 Zebra Dr.
(Mailing address MAY BE A POST OFFICE BOX)	North Fort Myers, FL-33917
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	nddress on our records, <u>enter the name of the new registered</u>
Name of New Registered Agent:	.1 >
New Registered Office Address: 528 Ze	Ebro Dr. Enter Florida street address

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

North Fort Kyers Florida 33917
Zip Code

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	James Frost	528 Zebra Dr.	X Add
		528 Zebra Dr. Worth Fort Myers, FL-3391	□Remove
			□Add
			□Remove
			□Change
			□Add
			□Remove
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Effectiv	e date, if other than tl	he date of filing			(optiona	1)
lf an effec <u>Note:</u> I	etive date is listed, the date n f the date inserted in this nt's effective date on the	nust be specific and block does not me	cannot be prior to date eet the applicable st		han 90 days after filir	ig.) Pursuant to 605.02
je recc	ord specifies a delay 90th day after the re		ate, but not an	effective time	e, at 12:01 a.m	. on the earlier
	our day arear tire ri					
The 9	3/12	·	<u> 7070</u>	101	11)	
The 9		Signature of a m	2020 .	representative of a	M nember	

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