## 119000137059

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



700337126167

700337126167 11/19/13--01009--029 \*\*30,00

19 NOV 19 AM 9: 14

Chicitells DEC 14 5018

## **COVER LETTER**

Registration Section Division of Corporations

P.O. Box 6327 Tallahassee, FL 32314

30:

GLOBETR	OT LLC		<u> </u>
SUBJECT:	Name of Lim	ited Liability Company	55
			19 101/3
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	CHARLES GENTRY		
		Name of Person	<del></del>
	ACCOUNTING AND TA	X ASSOCIATES PA	
		Firm/Company	<del></del>
	1903 N HERCULES AVE		
		Address	
	CLEARWATER, FL 3376	3	
		City/State and Zip Code	
	CHARLIE@ACCOUNTIN		
	E-mail address: (	to be used for future annual report notif	ication)
For further information c	oncerning this matter, please ca	all:	
CHARLES GENTRY		727 230-6964	
Name o	f Person	at () Area Code Daytime	: 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)
мап.	ING ADDRESS:	STREET/COURH	ER ADDRESS:
	ration Section on of Corporations	Registration Section Division of Corpora	
	ox 6327	Clifton Building	циона

2661 Executive Center Circle Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

12. i

	<b>6</b> 🧐
any as it now appears on our records.) Liability Company)	10/10/10
were filed on MAY 21, 2019	and assegned of
	*
oility company here:	
ility Company," the designation "LLC" or the a	bbreviation "L.L.C."
2918 W BAY COURT AVE	
TAMPA, FL 33611	
2918 W BAY COURT AVE	
TAMPA, FL 33611	
ffice address on our records, entere:  Enter Florida street address	the name of the new
City	Zip Code
	were filed on MAY 21, 2019  bility company here:  lity Company," the designation "LLC" or the a 2918 W BAY COURT AVE TAMPA, FL 33611  2918 W BAY COURT AVE TAMPA, FL 33611  ffice address on our records, entere:  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

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>	<u>Address</u>	Type of Action
	STEVEN YALE	2918 W BAY COURT AVE	
MGR ———			
		TAMPA, FL 33611	<b>5</b> 6
			Remove
			Change
	MARINA WAISMAN	2918 W BAY COURT AVE	
MGR 			Add
		TAMPA, FL 33611	
			Remove
			Change
			Change
	<del></del>		
			Remove
			Change
			Change
			Remove
			= 0
			Change
			Remove
			<b></b>
			☐ Remove
			Change

<b>Th.</b>		<u></u>	
·		12.	
<del></del>			
	4.01***		
	·		<del></del>
	<u></u>		
effective date is listed, the date must b	e specific and cannot be prior	o date of filing or more than 90 days after f	iling.) Pursuant to 605.029
e: If the date inserted in this bloc iment's effective date on the Department		ble statutory filing requirements, this	date will not be listed a
		an effective time, at 12:01 a.	m. on the earlier
ne 90th day after the recor	a is filed.		
NOVEMBER 13	2019		
	· · · · · · · · · · · · · · · · · · ·	_ •	
Male -		rized representative of a member	

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00