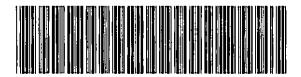
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(Re	equestor's Name)	
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PICK-UP	WAIT	MAIL
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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C. BRUMBLE; JUN 2 8 2022

COVER LETTER

	gistration S vision of Co			
CHR ITAT.	KULIK BU	JSINESS LLC	,	
SOBJECT.		Name of Lin	nited Liability Company	
Division of Corporations KULIK BUSINESS LLC Name of Limited Liability Company The enclosed Articles of Amendment and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: DMYTRO KULIK Name of Person Firm/Company 401 HARBOUR PLACE DRIVE, 1211 Address TAMPA. FL, 33602 City/State and Zip Code dvkulik@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Dmytro Kulik 813 4689777 Area Code Daytime Telephone Number Enclosed is a check for the following amount: □ \$25.00 Filing Fee Certificate of Status Certificate of Status				
Please retur	n all correspo	ondence concerning this matter	to the following:	
		DMYTRO KULIK		
			Name of Person	
			Firm/Company	
	DMYTRO KULIK Name of Person			
		, , , , , , , , , , , , , , , , , , ,	Address	113
		TAMPA, FL, 33602		
		dvkulik@gmail.com	City/State and Zip Code	
			to be used for future annual report not	ification)
For further i	nformation c	oncerning this matter, please c	all;	
Dmytro Kul	ik 			
	Name o	f Person	Area Code Daytin	ne Telephone Number
Enclosed is a	check for th	ne following amount:		
□ \$25.00 F	îling Fee		Certified Copy	Certificate of Status &
				ation
P.C	. Box 632	7	The Centre of T	•
Tal	lahassee. F	FL 32314	2415 N. Monro	e Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

KULIK BUSINESS LLC		
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company	were filed on 05/21/2019	and assigned
Florida document number L19000137258		
his amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
GLOBAL LOADS LLC		
The new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "LLC" o	r the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	401 Harbour Place Drive, 1211	
Principal office address MUST BE A STREET ADDRESS)	Tampa, FL, 33602	
		022
Enter new mailing address, if applicable:	401 Harbour Place Drive, 1211	₩ T
Mailing address MAY BE A POST OFFICE BOX)	Tampa, FL, 33602	<u> </u>
	<u> </u>	N C
		2
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	address on our records, <u>enter th</u>	e name of the new regist
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	. Flori	da

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.

City

Zip Code

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	ELYES CHAOUCH	10851 RAIN LILLY PASS	
		LAND O'LAKES, FL, 34638	□Remove
			□Change
AMBR	PARVIZ MAHERRAMOV	10851 RAIN LILLY PASS	= Add
		LAND O'LAKES, FL, 34638	□Remove
			□ Change
			□Add
			□Remove
			Change
			
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Effective	date, if other	than the date o	f filing:		((optional) after filing.) Pursuant	
Note: If	the date inserted	in this block doe	es not meet the app	dicable statutory	or more than 90 days filing requirements	after filing.) Pursuant , this date will not b	to 605,0207 be listed as
document	t's effective date	on the Departme	ent of State's recor	ds.			
,		. ~	na .				
e recora s d is filed.	pecifies a delaye	d effective date, t	out not an effective	e time, at 12:01 a	.m. on the earlier o	f: (b) The 90th day	y after the
AF Dated	RIL 28		2022	///	/		
			1	F//4	1		
							_
		Signalin	re of a member or au	impozeu represent	ative of a member		

Filing Fee: \$25.00