## L19000241781

(Requestor's Name)			
(Address)			
(Ac	idress)		
(Ci	ty/State/Zip/Phone	#)	
PICK-UP	☐ WAIT	MAIL	
(Bı	usiness Entity Nam	e)	
(Document Number)			
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## **COVER LETTER**

TO: Registration : Division of Co					
	Properties, LLC.				
SUBJECT:	Name of Linu	ited Liability Company	<del></del>		
The enclosed Articles of	of Amendment and fee(s) are sub-	mitted for filing.			
Please return all corresp	pondence concerning this matter	to the following:			
	Julieth Gutierrez				
		Name of Person			
	Global G Properties, LLC.				
	Firm/Company				
	6503 Nikki Way				
	Address				
	Lake Worth, FL 33467				
		City/State and Zip Code			
	juliethmnz@gmail.com				
	E-mail address: (	to be used for future annual report notific	ation)		
For further information	concerning this matter, please co	all:		(2) (2)	
Julieth Gutierrez		561 676-9141 at ()		9C=	
Nanx	Name of Person Area Code Daytime Telephone Number			$\overline{z}$	
				;**10 ******	$\Xi$
Enclosed is a check for	the following amount:			ئڌ.	20.7
□ \$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)	1.3	

MAILING ADDRESS: Registration Section Division of Corporations

P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Global G Properties, LLC.			
( <u>Name of the Limited Liability Co.</u> (A Florida Limi	mpany as it now appears on our records and Liability Company)		
The Articles of Organization for this Limited Liability Comp Florida document number <u>L19000241781</u> .	any were filed on FL	and assigned	
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liability company here:			
The new name must be distinguishable and contain the words "Limited I.	iability Company," the designation "LLC"	or the abbreviation "L.L.C."	
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS	<u> </u>		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
		3	
B. If amending the registered agent and/or registered registered agent and/or the new registered office address	d office address on our records. <u>here</u> :	enter the name of the new	
		ල 💢	
Name of New Registered Agent:			
New Registered Office Address:	<u></u>		
	Enter Florida street address		
	, Flo	rida	
	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>	Name	Address	Type of Action
MGR	GUTIERREZ. YHON		
	<del></del>	6503 NIKKI WAY LAKE WORTH, FL 33467	■ Remove
			Change
P	GUTIERREZ. JULIETH	6503 NIKKI WAY LAKE WORTH, FL 33467	
			☐ Remove
			Change
			□ Remove
			Change
		<u> </u>	
			Remove
			Change
			□ Add
			□ Remove
			Change
	<del></del>		Add
			□ Remove
			Change

If amending any ot	her information, enter ch	ange(s) here: (	Attach additiona	l sheets, if necess	ary.)
			-		
		•			
					<del></del>
					<u>.</u>
<del></del>					
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			<del></del>	·	<del></del>
	<del></del>		·		<del></del> -
					<del></del>
If an effective date is list Note: If the date inse	her than the date of filing ed, the date must be specific and erted in this block does not m date on the Department of St	cannot be prior to d seet the applicable			ng.) Pursuant to 605,0207 (
	es a delayed effective d fter the record is filed.	ate, but not a	n effective tim	e, at 12:01 a.n	n. on the earlier of:
October, 10		2019			
- Ju	Lill Signature of a to	newber or authorize	ed representative of :	n member	<u>.</u>
Julieth Gr	itierrez				
		Typed or printed n	ame of signee		<del>.</del>

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Filing Fee: \$25.00