Division of Corporations **Electronic Filing Cover Sheet**

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(((H20000092876 3)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : CORPORATION SERVICE COMPANY

Account Number : I20000000195 Phone : (850)521-0821 Fax Number : (850)558-1515

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:_

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN GLOBAL PRODUCTION IMPORT & EXPORT, LLC

Certificate of Status	0
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Page Count	03
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Fax Server No. 0107 P. 1

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Mar. 24, 2020 12:00PM

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

GLOBAL PRODUCTION IMPORT & EXPOR	T, LLC				
(Name of the Limited Lighility Compa (A Florida Limited)	iny as it now appears on our records.) Liability Company)				
The Articles of Organization for this Limited Liability Company	and assi	and assigned			
Florida document number <u>L20000076525</u> .					
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the limited liab	ility company here:				
The new name must be distinguishable and contain the words "Limited Linbi	lity Compuny," the designation "LLC" or th	e abbreviation "L.I	"С,"		
Enter new principal offices address, if applicable:	A-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1				
(Principal office address MUST BE A STREET ADDRESS)	***************************************	<u> </u>	2020		
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			₹ 2		
Enter new mailing address, if applicable:		21.17	ဟ		
(Mailing address MAY BE A POST OFFICE BOX)			<u>>></u>		
		<u> </u>	ထ္		
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B. If amending the registered agent and/or registered of		er the name (of the no		
registered agent and/or the new registered office address her	<u>e</u> :				
Name of New Registered Agent:					
New Registered Office Address:					
	Enter Florida street address				
	, Florida	Zm Code			
	City	Zīp Code			
New Registered Agent's Signature, if changing Registered Agent:					
I hereby accept the appointment as registered agent and agre provisions of all statutes relative to the proper and complete					
accept the obligations of my position as registered agent as p					

If Changing Registered Agent, Signature of New Registered Agent

Page 1 of 3

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.

Mai. 24. 2029 12:01PM

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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
<u>AMBR</u>	Jean Erol Charles	PO BOX 580201	□Add
		ORLANDO, FL 32858	≥ Remove
			C Change
AMOR	Jean Rol Charles	TOMASSIN 32 #42	
		PETION VILLE HAITI	П Кеточе
	-		Change
AMBR	Jean Rony	PQ BOX 580201	□ Add
		ORLANDO, FL 32858	Ŏ Remove
			□ Clunge
AMBR	Rk Richard Marc	MONNE HERCULE #50	ĽŽ Add
		PETION VILLE, HAITI	C Remove
			☐ Change
			□ Add
			Ü Remove
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E. Effectiv	e date, if other tha	n the date of fili	ng:	Inter-CEVIEW on more than	(optional) 90 days after filing.) Pursuo	ner to 605 0201
Note: 1	f the date inserted in t	his block does not	meet the applicabl	statutory filing requir	ements, this date will no	t be listed as
docume	nt's effective date on	the Department of	State's records.			
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Dated	03/24/2	020	. 1			
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		Signature of a	a internoce of authorizing	en letaessementae of a mei	HONGE	

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Filing Fee: \$25.00