Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations Fax Number : (850)617-6383

From:

Account Name: REGISTERED AGENTS INC.

Account Number: 120090000081 Phone : (307)200-2803

Fax Number : (855)330-1010

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

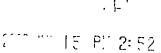
Email Address:___

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN THIRLWALL GLOBAL L.L.C

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Page Count	04
Estimated Charge	\$25.00

Help

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



Thirlwall Global L.L.C.	ed Liability Company as it now appear (A Florida Limited Liability Company)	s on our records.)
The Articles of Organization for this Limited Li Florida document number L20000101795		
This amendment is submitted to amend the follo	owing:	
A. If amending name, enter the new name of	the limited liability company he	<u>re</u> :
The new name must be distinguishable and contain the w Enter new principal offices address, if applic (Principal office address MUST BE A STREE	able:	esignation "LLC" or the abbreviation "L.L.C."
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	BOX)	
B. If amending the registered agent and/ registered agent and/or the new registered of Name of New Registered Agent:	for registered office address on the first of the first o	our records, enter the name of the ne
	7901 4th St N STE 30	
New Registered Office Address:	· <u> </u>	rida street address
	St. Petersburg	, Florida 33702
	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, <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	ALEJANDRO PAREDES	5960 SW 57 AVE	
		MIAMI, FL 33133	☑ Remove
			☐ Change
			□ Add
			Remove
			Change
			Add
			□ Remove
			Change
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ective date, if other than the date effective date is listed, the date must be tee. If the date inserted in this block nument's effective date on the Department.	e specific and cannot be p t does not meet the ap	prior to date of filing to plicable statutory f	or more than 90 days a iling requirements.	fter filing.) Pursuant to 605	5.020 ed a
record specifies a delayed e he 90th day after the record	ffective date, but d is filed.	not an effectiv	e time, at 12:0	1 a.m. on the earli	er c
_{ed} July 15	202	.0			
Riluy Paul	gnature of a member or	authorized represents	tive of a member		
) 31)	and the creation of the contract of the				

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Filing Fee: \$25.00