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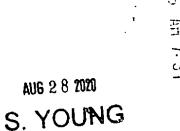


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COVER LETTER

	istration Sectision of Corp			•
SUBJECT:	L+L	Global Enter	prise L.L.C.	
SOBJECT.		Name of Limit	ed Liability Company	·
721 L 1		and fact a and public	sitted for filing	
		mendment and fec(s) are subn dence concerning this matter t		
r tease return	an conceptan	<u>.</u>	2	
		Britiney	\ -	
			Name of Person	
			Firm/Company	
		1840 Fletche	r Street	
income Entail is co leuse Keep worther	is correct		FL 33COC City/State and Zip Code wait @ gmail. (COM notification)
For further is	nformation co	neerning this matter, please ca		
Brit	Cinul S Name of	erson	at (<u>305</u>) <u>924</u> Area Code) Da	-6495 ytime Telephone Number
Enclosed is: ☐ \$25.00		e following amount: ☑ \$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy tadditional copy is enclosed)
	niling Address gistration S		Street Addres Registration	

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

L+L Global Enterpri	Se L.L.C		
(Name of the Limited Liability Compar (A Florida Limited L	v as it now appears on our	records.) . 3	
TA FIORIGI CHIMICO I.	naomity Company)	بــــــــــــــــــــــــــــــــــــ	į
The Articles of Organization for this Limited Liability Company	were filed on June	15, 2030 _ and assigned -	
Florida document number <u>L20000164432</u> .	<u></u>	5	
Florida document number CAPP PIO 1130.			į
This amendment is submitted to amend the following:		<u> </u>	ة نسو
A. If amending name, enter the new name of the limited liabi	lity company here:	<u> బ</u>	
The new name must be distinguishable and contain the words "Limited Liabili	ty Company," the designation	n "LLC" or the abbreviation "L.L.C."	-
Enter new principal offices address, if applicable:			-
(Principal office address MUST BE A STREET ADDRESS)			
Trincipia office address inost be A street into Regar			-
	<u></u>	<u> </u>	-
Enter new mailing address, if applicable:			-
(Mailing address MAY BE A POST OFFICE BOX)			_
B. If amending the registered agent and/or registered office a	ddress on our records,	enter the name of the new registe	ered
agent and/or the new registered office address here:			
Name of New Registered Agent:			_
New Registered Office Address:	Enter Florida street	t address	-
		, Florida Zip Code	_
	City	гір Сойе	
New Registered Agent's Signature, if changing Registered Agent:			
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as pheing filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my dut provided for in Chapter	ies, and I am familiar with and · 605, F.S. Or, if this document is	

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>	Address	Type of Action
AP	Keenyn Joplin	1840 Fletcher Street	IBAdd
		1840 Fletcher Street Hollyword, FL 33030	□Remove
			□Change
			🗆 Add
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		<u> </u>	Change
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			□ Change

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Note: It	e date, if other than the date of filing:
record d is tile	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after th I.
Dated _	
/arcu _	
	Double of a member
	rignature of a mention of authorized representative of a member
	Brithmed Swait

Filing Fee: \$25.00