Florida Department of State Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : GLOBAL SUCCESS INVESTMENTS LLC

Account Number : I20200000016 Phone : (954)903-4036 Fax Number : (954)246-0340

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

Email Address: nathaly . coartes Etaxcare . Inc.

PER CE 12 ANTESO STATE SANTANIAN TALL THE PROPERTY OF THE PURIOR OF THE

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN RAGO 9295 LLC

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Page Count	01
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APPROVED AND

Electronic Filing Menu

Corporate Filing Menu

Help

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

LLC	
y Company as it now appears on our records.) Limited Liability Company)	
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ted liability company here:	
ted Liability Company," the designation "LLC" or t	he abbreviation "L.L.C."
	W-200-771
ESS)	
office address on our records, <u>enter the</u>	name of the new registered
	2 50
Enter Florida street address	
Florid	Zip Code
	Company as it now appears on our records.) Limited Liability Company) ompany were filed on O7:10/2020 ed liability company here: ed Liability Company." the designation "LLC" or to the second of

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.

F	r	o:n	:	Nathaly	Cuartas
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- Fax: 19542460340

To: Agent Amnd Florida

Fax. (850) 617-6383

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09/12/2023 11:12 AM

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
AMBR	LUIS G RAMIREZ	22615 SW66TH AVE APT 306	□Add
		BOCA RATON, FL, 33428	≣Remove
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		11.00
Effective date, if other than the lift an effective date is listed, the date in Note: If the date inserted in this document's effective date on the	block does not meet the applicable statutory file	(optional) more than 90 days after filing.) Pursuant to 605,0207 (3 ing requirements, this date will not be listed as th
e record specifies a delayed effect rd is filed.	ive date, but not an effective time, at 12:01 a.m	on the earlier of: (b) The 90th day after the
SEP 12 Dated	. 2023	
	PHLOIS RAMINES Signature of a member or authorized representation	
	Signature of a member or authorized representati	ve of a member