Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H21000255339 3)))



H210002553393ABC/

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6383

From:

57

ä ₹ Account Name : TAX ZONE INC. Account Number : 120190000044 Phone : (407)888-3131

Fax Number

: (888)453-0509

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

# LLC AMND/RESTATE/CORRECT OR M/MG RESIGN SB GLOBAL GROUP LLC

Certificate of Status	0
Certified Copy	0
Page Count	07
Estimated Charge	\$25.00

Electronic Filing Menu

Corporate Filing Menu

Help

1

## **COVER LETTER**

TO: Registration S Division of Co	ection rporutions		
SB GLOB.	AL GROUP LLC		
	Name of Lim	ited Liability Company	<del></del>
	Amendment and fee(s) are sub ondence concerning this matter	•	
	STEVEN P BAEZ ARIAS		
		Name of Person	<del></del>
	SB GLOBAL GROUP LL	С	•
	<del>-</del>	Firm/Company	
	6026 LAKE AVE		
		Address	
	SANFORD, FL 32773		
		City/State and Zip Code	
	ACCOUNTANT@TAXZO		
		to be used for future annual report notif	acanon)
For further information of	concerning this matter, please o	all:	
STEVEN P BAEZ ARIA	AS	407 888-3131 at ( )	
Name o	of Person	at ()	e Telephone Number
Enclosed is a check for t	the following amount:		
■ \$25.00 Filing Fee	☐ \$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 (additional copy is enclosed)

#### Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

## Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Page: 6 of 8

H21006255339

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SB GLOBAL GROUP LLC			
( <u>Name of the Limited Liability Com</u> (A Florida Limite	nany as it now appears on our record d Liability Company)	ds.)	<del></del>
The Articles of Organization for this Limited Liability Compar	ny were filed on 04/16/2021	and	assigned
Florida document number L21000240016			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited lia	bility company here:		
SB GLOBAL ENTERPRISE LLC			
The new name must be distinguishable and contain the words "Limited Lia	bility Company," the designation "LLC	C' or the abbreviation	"L.L.C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)			
		مراة عال	2
		in a fill of the state of the	<u>-</u>
Enter new mailing address, if applicable:			<u> </u>
(Muiling address MAY BE A POST OFFICE BOX)		5) T	30
14.4 Marting wown only 14.5 Marting was 14.5 Marting work 14.5 Marting work 14.5 Marting was 14.5 Marting work 14.5 Marting work 14.5 Marting was 14.5 Marting work 14.5 Marting was 14.5 Marting		T.E	<u>~</u> [7]
		25	<u> </u>
B. If amending the registered agent and/or registered offic	e address on our records, <u>enter</u>	r the name of the	new registered
agent and/or the new registered office address here:			<del></del>
Name of New Registered Agent			<u> </u>
New Registered Office Address:			
THE TAXABLE VALUE OF THE PARTY	Enter Florida street addre	(2)	
	, <b>F</b>	lorida	
	Ctty	Zip Co	rde
New Registered Agent's Signature, if changing Registered Agen	<u>ıt:</u>		
		_	

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

4210002553393

18884530509

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

To: 18506176383

<u>Title</u>	<u>Name</u>	Address	Type of Action
			□Add
			Remove
			□Change
			□Add
			⊡Remove
			DChange
			DAdd
			Change
			🗀 Remove
			☐ Change
<del></del>			□ Add
			□Remove
			□Change
			□Add
			Remove
			□Change

\* Page: 8 of 8

			<del></del>		•
					-
	<del></del>				-
					_
					_
					-
<del>, ,</del>					-
					_
					_
			<del> </del>		_
			<del></del>		-
			<del></del> -		
				<del></del>	_
					<del></del>
					_
· · · · · · · · · · · · · · · · · · ·					
Effective date, if other than th	e date of filing:		(optional)		
Note: If the date inserted in this b	lock does not meet the appli	cable simulory filing req	an 90 days after filing.) uirements, this date	, Pursuent to b will not be li	isted a
document's effective date on the I	Department of State's record	<b>S</b> .			
			Process The	4,	. <del></del>
e record specifies a delayed effecti rd is filed.	ve date, but not an effective	time, at 12:01 a.m. on th	e earmer on (0) 12		
to to thou			-	2 N 3 F	Ì
JUNE 30	2021		,	tri s gas general	JUN 30
		1		ار العد ا <del>ب ا</del> الم	7
	Simply of a member of 80	thorized representative of a	member	<u> </u>	جو.
	DISTRICT OF A PERSON OF AN				