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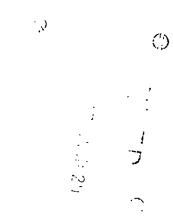
(R	equestor's Name)	
(A	ddress)	
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(C	ity/State/Zip/Phone #)	
PICK-UP	☐ WAIT	MAIL
(B	usiness Entity Name)	
(D	ocument Number)	
Certified Copies	Certificates of S	tatus
Special Instructions to	Filing Officer:	

Office Use Only 5. C .



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COVER LETTER

TO:

TO: Registration S Division of Co				
	LL GLOBAL C	ONSULTING LLC		
SUBJECT:	Name of Lin	nited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please return all correspo	ondence concerning this matter	to the following:		
		Sonia Becerra		
		Name of Person		
		Swyft Filings		
		Firm/Company		
		3 Greenway Plaza #132	20	
		Address	<u> </u>	
		Houston, TX 77046		
		City/State and Zip Code		
		letletty@yahoo.com		
	E-mail address: (to be used for future annual re	port notification)	
For further information o	concerning this matter, please c	all:		
Sonia B	Secerra	at (877)	777-0450	
Name o	of Person	Area Code	Daytime Telephone Number	
Englaced is a ghost for	ka falkanian amana			\bigcirc
Enclosed is a check for t				
№ \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclo-	Sed	tus & closed) (
Mailing Address Registration S Division of C P.O. Box 632 Tallahassee,	Section Corporations 27	Division The Cent 2415 N. (ion Section of Corporations re of Tallahassee Monroe Street, Suite 810	• • • • • • • • • • • • • • • • • • • •
		Tallahass	ee, FL 32303	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

LL GLOBAL CONSULTING LLC

(Name of the Limited Liability Com (A Florida Limite	pany as it now appear d Liability Company)	on our records.)	· · · · · ·
The Articles of Organization for this Limited Liability Compar Florida document number	ny were filed on	07/08/2021	and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited lia	bility company her	<u>e</u> :	
The new name must be distinguishable and contain the words "Limited Liab	pility Company," the des	ignation "LLC" or the ab	obreviation "L.L.C."
Enter new principal offices address, if applicable:	2425 S Atlantic		
(Principal office address MUST BE A STREET ADDRESS)	Daytona Beach Si	nores, FL 32118	
Enter new mailing address, if applicable:	226 N Nova R	d. Suite 349	
(Mailing address MAY BE A POST OFFICE BOX)	Ormond Beacl	n FL 32174	
B. If amending the registered agent and/or registered office agent and/or the new registered office address here: Name of New Registered Agent:		.)	()
New Registered Office Address:			<u>· </u>
The state of the s	Enter Florida	street address	
		, Florida	
lew Registered Agent's Signature, if changing Registered Agent:	City		Zip Code
hereby accept the appointment as registered agent and agrousions of all statutes relative to the proper and complete ccept the obligations of my position as registered agent as peing filed to merely reflect a change in the registered office ompany has been notified in writing of this change.	performance of my provided for in Cha	duties, and Lam fainter 605 F.S. Or i	miliar with and
If Chan			

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
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			□Change
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ffective date, if other than the date of filing:	optional)	-
an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days ote: If the date inserted in this block does not meet the applicable statutory filing requirements ocument's effective date on the Department of State's records.		ant to 605,0207 of be listed as
record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of is filed.	of: (b) The 90th	day after the
ared Hugust 09 2021	·	
x / stacea tendo		

Filing Fee: \$25.00