

h21 000380258

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

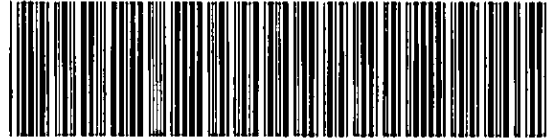
(Document Number)

Certified Copies _____ Certificates of Status _____

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09/13/21--01022--005 **25.00

21 SEP -12 PM 3:20

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Exclusive Global Real Estate Investment Group LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Marc A. NADER

Name of Person

Exclusive Global Real Estate Investment Group LLC

Firm/Company

209 Lone Pine Drive

Address

Edgewater FL 32132

City/State and Zip Code

faithingodmissionaries@hotmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Marc A. NADER

407 820 4467
at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$60.00 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

21 SEP 13 PM 3:20

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

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>	<u>Address</u>	<u>Type of Action</u>
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
		4955 SW 166TH AVE MIRAMAR, FL 33027	<input checked="" type="checkbox"/> Change
MGR	Anne Dyna Estrade JnBaptiste		<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

Anne's full name on her Driver's license is : Anne Dyna Estrade Jn Baptiste 21 SEP 13 PH 3: 20

We would like to change her full name to Anne Dyna Estrade Jn Baptiste

(We previously had Anne D Jn Baptiste)

Please modify name to Anne Dyna Estrade Jn Baptiste

First Name	Middle Name	Last Name
Anne	Dyna	Estrade Jn Baptiste

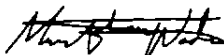
E. Effective date, if other than the date of filing: 8/25/2021 (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated September 9, 2021



Signature of a member or authorized representative of a member

Marc A. NADER

Typed or printed name of signee