

L21 000 494 124

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

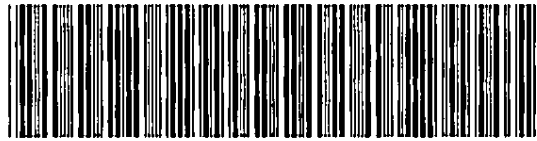
(Business Entity Name)

(Document Number)

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2022 APR -1 AM 10:55

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C. BRUMBLEY
APR 14 2022

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: GLOBAL TRANSPORTATION AND INTERPRETATION, LI
Name of Limited Liability Company

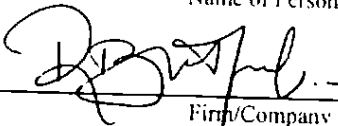
RECEIVED

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

Please return all correspondence concerning this matter to the following:

2022 APR -1 AM 7:59
STATE
SECRETARY OF STATE
TALLAHASSEE, FL

RUTHERMELINDA BASANTA DEPENA
Name of Person


Firm/Company

1317 EDGEWATER DR. #2248
Address

ORLANDO, FLORIDA 32804
City/State and Zip Code

GLOBALTRANSPORTATIONINTERPRETA@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

RUTHERMELINDA BASANTA at (475) ANYDAY/4758003374
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- ☐ \$25.00 Filing Fee ☐ \$30.00 Filing Fee & Certificate of Status ☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) ☒ \$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

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

GLOBAL TRANSPORTATION AND INTERPRETATION, LLC

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

The Articles of Organization for this Limited Liability Company were filed on 11/17/2021 and assigned
Florida document number L21000494124.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

GLOBAL TRANSPORTATION AND INTERPRETATION SERVICES, LLC

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Same address

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

Same address

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

Same Agent

New Registered Office Address:

Enter Florida street address

Florida

City

Zip Code

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.

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>
P	Ruthermelinda Basanta Depena		<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
		1317 edgewater dr, suite 2248 Orlando, FL, 32804	<input checked="" type="checkbox"/> Change
VP	Isaac N Pena		<input type="checkbox"/> Add
		1317 edgewater dr, suite 2248 Orlando, FL, 32804	<input checked="" 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.)

We need change the following:

1. The name of President: RUTHERMELINDA BASANTA DEPENA

REASONS: My Venezuela Passport has first name and second name, and surnames

also separated but in my separated but in my U.S.A. identification,

the names and surnames were hit and should identification,

and because of this error, i have not been able to open

my company's bank account.

2. The Vice President: ISAAC N PENA

REASON: I'm removing him due to difficulties opening a bank account.

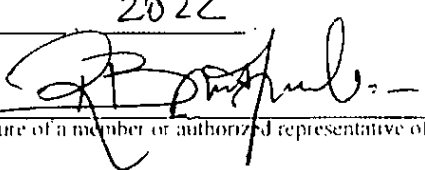
E. Effective date, if other than the date of filing: FEBRUARY, 13/2022 (optional)

(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 February 13 2022


Signature of a member or authorized representative of a member

RUTHERMELINDA BASANTA DEPENA

Typed or printed name of signee