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.

(((H22000273070 3)))



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:

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:____

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN PEPPER GLOBAL GROUP LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

Electronic Filing Menu Corporate Filing Menu

Help

T. LEMIEUX AUG 15 2022

COVER LETTER

TO:	2 Registration Sec	ntian	t.	:		
TO.	Division of Corp			î*		
		РЕРРЕ	R GLOBAL GROUP LLC	, x		
SUBJ	ECT:	Name of Lim	ited Liability Company			
The er	nclosed Articles of a	Amendment and fee(s) are sub	mitted for filing.			
Please	return all correspon	ndence concerning this matter	to the following:			
		ANDRES CONTRER	AS			
			Name of Person			
		PEPPER GLOBAL GROU	UP LLC			
	Firm/Company					
	3055 NE 190th STAPT 202					
	Address					
	Aventura, FL 33180					
			City/State and Zip Code			
		nathaly.cuartas@taxcare	einc.com to be used for future annual report notif	(cution)		
For fu	rther information co	oncerning this matter, please co		(Carrolly		
	aly Cuartas		954 9034036			
	Name of	Person	at () Area Code Daytime	Telephone Number		
Enclos	sed is a check for th	e following amount:				
≡ \$3	25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	S55.00 Fiting 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

From: Nathaly Cuartas

Fax: 19542'460340

To: Agent Amnd Florida

Fax: (850) 617-6383

Page: 4 of 6

08/12/2022 12:25 PM

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

PEPPER GLOBAI					
(<u>Name of the Limited Liability Compan</u> (A Florida Limited Li	y as it now appears on our recability Company)	ords.)		_	
The Articles of Organization for this Limited Liability Company v	vere filed on 12/20/2021		an	d assig	ined
Florida document number L21000532435					
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the limited liabil	ity company here:				
The new name must be distinguishable and contain the words "Limited Liabilit	y Company," the designation "I.	LC" or the	abbreviati	on "L.L.	.C."
Enter new principal offices address, if applicable:		_			
(Principal office address MUST BE A STREET ADDRESS)		<u> </u>			
					
Enter new mailing address, if applicable:				_	
Mailing address MAY BE A POST OFFICE BOX)					
B. If amending the registered agent and/or registered office acagent and/or the new registered office address here:	ldress on our records, <u>ent</u>	er the na	i <u>me of th</u>	e new	registe
M. CM. D. C. LA		3	2	202	
Name of New Registered Agent:	<u>.</u>			AUG	
New Registered Office Address:	Enter Florida street add	lress .	<u> </u>	<u>ਨ</u>	<u>~</u>
			7	2	ILEÜ
	City	Florida _	Zip		
New Registered Agent's Signature, if changing Registered Agent:			988 148	Š	
hereby accept the appointment as registered agent and agree					

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.

From: Nathaly Cuartas

Fax: 19542450340

To: Agent Amnd Florida

Fax: (850) 617-6383

Page: 5 of 6

08/12/2022 12:25 PM

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
AMBR	JUAN CARLOS ARCIA	1355 NW 135TH ST	
		NORTH MIAMI, FL 33167	≣Remove
			□Change
AMBR	RC INVESTMENT GROUP LLC	30 N Gould St Ste 2299	= Add
		Sheridan, WY 82801	Remove
			□Change
			□Add
			□ Remove
			Change
			□Add
			Remove
			□Change
			□Add
			Петюve
			☐ Change
***			DAdd
			□Remove
			Ti Change

in adicaloung any other intermi	tion, enter change(s) here: (Attach additional sheets,	ij necessary.)
		
		· · · · · · · · · · · · · · · · · · ·
· · · · · · · · · · · · · · · · · · ·		
· 		
Effective date, if other than the (If an effective date is listed, the date mu Note: If the date inserted in this b document's effective date on the I	it be specific and cannot be prior to date of filing or more than 90 dock does not meet the applicable statutory filing requirements.	_ (optional) lays after filing.) Pursuant to 605.0207 ents, this date will not be listed as
he record specifies a delayed effecti ord is filed.	e date, but not an effective time, at 12:01 a.m. on the earlie	er of: (b) The 90th day after the
Dated August 12nd	2022	
	P/Andres Confreros Signature of a member or authorized representative of a member	τ
	ANDRES CONTRERAS	
	Typed or printed name of signee	

Page: 6 of 6 08/12/2022 12:25 PM

From: Nathaly Cuartas * Fax: 19\$12460340 To: Agent Amnd Florida Fax: (850) 617-6383

Filing Fee: \$25.00