Fax: 8134365206

Division of Corporations

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To:

Division of Corporations

Fax Number : (850)617-6383

Fion:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 : (307)200-2803 Fax Number : (813)436-5206

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 SHEFAH VENTURES LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SHEFAH VENTURES LLC		
(Name of the Limited)	Jability Company as it now appears on our records.) Florida Limited Liability Company)	
The Articles of Organization for this Limited Liabi	lity Company were filed on 01/12/2022	and assigned
This amendment is submitted to amend the following	ng:	
A. If amending name, enter the new_name of th	e limited liability company here:	
Global Equity Partners LLC		
The new name must be distinguishable and contain the word	s "Limited Liability Company," the designation "LLC" of	or the abbreviation "L.L.C."
Enter new principal offices address, if applicabl	e:	
(Principal office address MUST BE A STREET)	ADDRESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BO	<u> </u>	
	•	>
B. If amending the registered agent and/or regi	stered office address on our records, <u>enter th</u>	e name of the ew registers
agent and/or the new registered office address h	<u>ere</u> :	
		3 7
Name of New Registered Agent:		
N D 1 LONG Allmin		
New Registered Office Address:	Enter Florida street address	-
		, 1977
-	, Flori	ida 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.

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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>	Type of Action
			□Remove
			Change
			[] Add
			□Remove
			Change
			□Add
			□Remove
			∩Change
			□Remove
			□Change
			□Add
			□Remove
			Change
			
			□Remove
			□Change

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record specifies a delayed effectiv Lis filed.	e date, but not an effective	time, at 12:01 a.m. on	the earlier of: (b) The 90th	day after the
January 31st	2025			
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