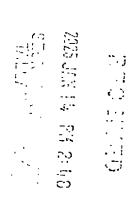
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# **CORPORATE** ACCESS, INC.

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## **WALK IN**

	CERTIFIED COPY	
XX	РНОТОСОРУ	
	cus	
XX	FILING	LLC AMEND
	NT GLOBAL LLC CORPORATE NAME AND DOCUM	MENT#)
((	CORPORATE NAME AND DOCUM	MENT #)
<del>-</del> (0	CORPORATE NAME AND DOCUM	(FNT #)
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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

LNT GLOBAL LLC			
( <u>Name of the Limited Liability Comp</u> (A Florida Limited	any as it now appears on our Liability Company)	records.)	
The Articles of Organization for this Limited Liability Company	y were filed on _01/25/202	2 and assigned	
Torida document number L22000045234			
his amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	bility company here:		
he new name must be distinguishable and contain the words "Limited Liab	ility Company," the designatio	n "LLC" or the abbreviation "L.L.C."	
Inter new principal offices address, if applicable:	<del></del>		
Principal office address MUST BE A STREET ADDRESS)		707	
nter new mailing address, if applicable:	<del></del>	<u> </u>	
Mailing address MAY BE A POST OFFICE BOX)			
		19.50 <b>6</b>	
		5 A S	
If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records.	enter the name of the new regist	
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida street address		
	, m.	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, <u>enter the title, name, and address of each person\_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

Title	<u>Name</u>	Address	Type of Action
AMBR	LIRAN IZHAKI	628 CLEVELAND ST APT 1008	□Add
		CLEARWATER, FL 33755	■Remove
			□Change
AMBR	TATIANA MARKOVA	628 CLEVELAND ST APT 1008	■Add
		CLEARWATER, FL 33755	⊡Remove
			□Change
			□ Add
			□Remove
		<del></del>	□ Change
			□Remove
			□ Change
			□Remove
			Change
			□Add
		·	□Remove

	ing any other information, enter change(s) here: (Attach additional sheets, if necessary.)
_	
-	
_	
_	
(If an effective Note: 11	tive date, if other than the date of filing:
he record ord is tile	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier or: (b) The 90th day after the d.
Dated _	1/14/2025
	Ador
	Signature of a member or authorized representative of a member
	LIRAN IZHAKI  Typed or printed name of signee

....

Filing Fee: \$25.00