

L22 000369553

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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2024 APR 29 PM 12:21

CLERK OF DISTRICT COURT  
JANUARY 1, 1991

*[Handwritten signature]*



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

April 8, 2024

RICHARD A ALTOMARE  
7754 LAKESIDE BLVD  
UNIT 462  
BOCA RATON, FL 33434

SUBJECT: A GLOBAL FUNDING LLC  
Ref. Number: L22000369553

We have received your document for A GLOBAL FUNDING LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Kiora Hester  
Regulatory Specialist II

Letter Number: 624A00007534

2024 APR 29 PM 12:22

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REC  
4-29

# COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: A GLOBAL FUNDING 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:

RICHARD A. ALTOMARE

Name of Person

A GLOBAL FUNDING LLC

Firm/Company

7754 LAKESIDE BLVD UNIT 462

Address

BOCA RATON, FLORIDA 33434

City/State and Zip Code

RAAL0AN7@GMAIL.COM

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

For further information concerning this matter, please call:

RICHARD ALTOMARE

Name of Person

at (561) 319-6480

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

2024 APR 29 PM 12:22

ALL AMENDED  
ARTICLES OF  
AMENDMENT  
FILED

FILED

ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF

A GLOBAL FUNDING 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 AUGUST 22, 2022 and assigned Florida document number ~~810 - 1100000000~~ L22000369553

This amendment is submitted to amend the following:

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

NA

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)

NA

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

NA

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:

N.A.

New Registered Office Address:

N.A.

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 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.*

N.A.

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>
<u>V.P.</u>	<u>BARBARA ALTOMARE</u>	<u>7754 LAKESIDE BLVD</u>	<input checked="" type="checkbox"/> Add
		<u>BOCA RATON FLORIDA 33434</u>	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
<u>V.P.</u>	<u>MAURICE KLEINMAN</u>	<u>253 CAMERON DRIVE</u>	<input checked="" type="checkbox"/> Add
		<u>WESTON FLORIDA 33326</u>	<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"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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STATE  
OFFICE  
TALLAHASSEE, FL

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

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ALLIANCE

**E. Effective date, if other than the date of filing:** \_\_\_\_\_ (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

April 23 2024

Richard A. Altomare

Signature of a member or authorized representative of a member

RICHARD A. ALTOMARE

Typed or printed name of signee

**Filing Fee: \$25.00**