## L2300078LA8

(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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## **COVER LETTER**

TO: Registration S Division of Co				
	al Drift LLC			
SUBJECT:	Name of Lim	ited Liability Company	<del> </del>	
The enclosed Articles of	of Amendment and fec(s) are sub	mitted for filing.		
Please return all corres	pondence concerning this matter	to the following:		
	Melissa Rose Heaney			
		Name of Person		
	Continental Drift LLC			
	-	Firm/Company	<del></del>	
	5753 Hwy 85 N #4075			
		Address		
	Crestview, FL 32536			
		City/State and Zip Code		
	melissaheaneym@gmail.co	m to be used for future annual report noti	(Tention)	
For further information	concerning this matter, please co		incurvity	
Melissa Heaney		443 386-3286		
Name	e of Person	at () Area Code Daytim	ne Telephone Number	
Unabased is a shock for	the following amount:			
■ \$25.00 Filing Fee	□ \$30.00 Filing Fee &	☐ \$55,00 Filing Fee &	☐ \$60,00 Filing Fee.	
= \$25.00 Timig Fee	Certificate of Status	Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy (additional copy is enclosed)	
Mailing Address: Registration Section		<u>Street Address:</u> Registration Se	ection	
Division of Corporations		Division of Corporations		
P.O. Box 6:		The Centre of T	-	

Tallahassee. FL 32314

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Continental Drift LLC		
( <u>Name of the Limited Liability (</u> A Florida Li	Company as it now appears on our record mited Liability Company)	<u>(s.</u> )
he Articles of Organization for this Limited Liability Com	npany were filed on February 13, 2023	and assigned
lorida document number L23000078698		
his amendment is submitted to amend the following:		
. If amending name, enter the new name of the limited	d liability company here:	
Global Puzzle LLC		
ne new name must be distinguishable and contain the words "Limited	Liability Company," the designation "LLC	" or the abbreviation "L.L.C."
nter new principal offices address, if applicable:		
rincipal office address MUST BE A STREET ADDRES	<u> </u>	<del></del>
		2023 HAR
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ii		
nter new mailing address, if applicable:		S 00 R
<u> failing address MAY BE A POST OFFICE BOX)</u>		
		- <del>115</del> 89 <b>-</b>
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. If amending the registered agent and/or registered o	ffice address on our records, enter	the name of the new register
ent and/or the new registered office address here:		
Name of New Registered Agent:		
NI D Car of A Admini		
New Registered Office Address:	Enter Florida street addres	ss -
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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 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
			□Add
			□Remove
			□Change
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			□Remove
			□Change

Effective date, if other than the date of filing:	<u> </u>	·			
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Pated February 27 2023  **Melissan Rose **Aconses  Signature of a member or authorized representative of a member					
Signature of a member or authorized representative of a member	<i>(</i> )	2022			
Signature of a member or authorized representative of a member	Pebruary 27 Pated		_·		
Signature of a member or authorized representative of a member		2.11	1/2		
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