L24000070838

(Requestor's Name)
(Address)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
,
Certified Copies Certificates of Status
Certified Copies Certificates of Status
Special Instructions to Filing Officer:





100427021581

04/10/24--01011--022 **25.00

2024 APR 10 AH 8: 19
SECRETARY OF STATE

COVER LETTER

Registration Section
Division of Corporations

Tallahassee, FL 32314

TO:

	BAL ENTERPRISE LLC		
SUBJECT:	Name of Lim	ited Liability Company	
	Amendment and fee(s) are sub	_	
	Pamela Poveda		
		Name of Person	
	ОСР ТЕСН		
		Firm/Company	
	333 SE 2nd Av Suite 2810),	2024 APR 10 SECRETAR TALLAH
		Address	<u> </u>
	Miami, FL 33131		
	pam@ocp.tech	City/State and Zip Code	
		to be used for future annual report not	
For further information of	oncerning this matter, please c	all:	
Pamela Poveda		305 537 0800	
Name o	of Person		ne Telephone Number
Enclosed is a check for the	he following amount:		
■ \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address Registration S Division of C	Section Corporations	Street Address: Registration So Division of Co	rporations
P.O. Box 632	27	The Centre of	Fallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

COC GLOBAL ENTERPRISE 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 $\frac{02/08/2024}{1}$ __ and assigned Florida document number __L24000070838 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: 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) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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: New Registered Office Address: Enter Florida street address _, Florida _ City 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

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, 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
MGR	Pamela Poveda	333 SE 2nd Av, Suite 2810, Miami, FL 33131	_ ≅ Add
			□Remove
			_ Change
			□ Add
			□Remove
			□Change
			□ Add
		SECRETARY TALLATOR	Change
		※C 開か で で	
			□Change
			□Add
			_ □Remove
			🗆 Change
			🗆 Add
			🗆 Remove
			_ □Change

-		-					
						2021 3E	
	_					INPR	
						<u> </u>	
						SSSS SE	. 1
							4
						77 3)
		•			-		
Affective date, if other than the fan effective date is listed, the date in Note: If the date inserted in this locument's effective date on the	ust be specific and block does not m	l cannot be prior neet the applica	able statutory f	iling requiremen	nts, this date) Pursuant to 605	.0207 ed as
record specifies a delayed effect f is filed.	ive date, but not	an effective til	me, at 12:01 a.	m. on the earlier	rof:(b) Th	ie 90th day afte	r the
		2024					
Pated March 21	 ,						
Pated March 21	Mill	(661)					
Dated March 21	Signature of a r	nember or autho	orized representa	tive of a member			

Filing Fee: \$25.00