## 171800006M

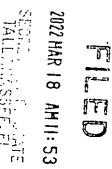
(Re	questor's Name)	
Ų.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



100383243481

03/18/22--01002--003 \*\*25.00



G 115/2022

## **COVER LETTER**

TO:	Registration Section Division of Corporations				
	ATTN: Neysa Culligan				
SUBJ	ECT: Voyance Global, LLC				
	Name of For	reign L	imited Liab	ility Co	mpany
Dear S	Sir or Madam:				
The er	nclosed application, certificate and fee	(s) are	submitted	for filing	<b>3</b> .
Please	e return all correspondence concerning	this n	natter to the	followir	ng:
Ron Sy	mon				
	Name of Person		·	_	
Voyano	ce Global, LLC			_	
	Firm/Company				
1100 B	rickell Bay Drive #82B			_	
	Address				
Miami,	,FL 33131				
	City/State and Zip C	ode	<u> </u>	<del></del>	
ron@v	oyance.global				
E-m	nail address: (to be used for future ann	ual rep	oort notifica	tion)	
For fu	rther information concerning this mat	ter, ple	ease call:		
Ron Sy	тол	at		623-23	
	Name of Person		Area Code	& Dayt	ime Telephone Number
	Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314			Divisio The Ce 2415 N	ation Section on of Corporations ontre of Tallahassee  Monroe Street, Suite 810 assee, FL 32303
	Enclosed is a check for the following Filing Fee \$\square\$ \$30 Filing Fee & Certificate of Status \$55 (9/15)		ount: \$55 Filing Certified (		☐ \$60 Filing Fee,  Certificate of Status &  Certified Copy

AMENDMENT TO CERTIFI	LIMITED LIABILITY COMPANY TO FILES ICATE OF AUTHORITY TO TRANSACT NESS IN FLORIDA N I (1-4 must be completed) rs on the records of the Florida Department of
SECTIO!	N I (1-4 must be completed)
Name of limited liability Company as it appear     State: Voyance Global, LLC	rs on the records of the Florida Department of
Enter new principal office address, if applicable:	1100 Brickell Bay Drive
( <u>Principal office address</u> <u>MUST BE A STREET ADDRESS</u> )	#82B
	Miami, FL 33131
Enter new mailing address, if applicable:	1100 Brickell Bay Drive
(Mailing address	#82B
MAY BE A POST OFFICE BOX)	Miami, FL 33131
2. The Florida document number of this limited li	ability company is: M20000008771
3. Jurisdiction of its organization: Wyoming	
4. Date authorized to do business in Florida: 09/2	1/2020
(If name unavailable, enter alternate name adopte	st contain "Limited Liability Company, " "L.L.C.," or "LLC.")  d for the purpose of transacting business in Florida and attach a maging members adopting the alternate name. The alternate name
6. If amending the registered agent and/or register registered agent and/or the new registered office a	red officer address on our records, enter the name of the new
Name of New Registered Agent: Ron Symon	
New Registered Office Address: 1100 Brickell Ba	
Mia	Enter Florida Street Address ami Florida 33131
	City, Florida 33131 Zip Code
the provisions of all statutes relative to the proper and accept the obligations of my position as regis	egistered Agent: ent and agree to act in this capacity. I further agree to comply with e and complete performance of my duties, and I am familiar with tered agent as provided for in Chapter 605, F.S. Or, if this e in the registered office address, I hereby confirm that the limited
167	Changing Registered Agent, Signature of New Registered Agent

itle/ Capacity	Name	Address Tyr	ype of Action	
Co-Found & R	Ron Symon	1100 Brickell Bay Dr #82B Miami FL 33131	⊠Add □ Remo	
EO	Harvey Worlitz	936 SW 1st Ave Suite 900 Miami FL 33130	- □Add • Remov	
			□Remo	
<del></del>			_ □Add	
			_□Remo	
<u></u>			_□Add	
		<del></del>	□Remo	
			_ □∧dd	
aforemention	a certificate, if required: no more t ned amendment(s), duly authentica ander the law of which this entity	ated by the official having custody of records in the	□Remo	

Filing Fee: \$25.00