P15000005111

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COVER LETTER

TO: Registration Se Division of Cor				
	GLOBAL ENTERPRISES CO	DRP		
SUBJECT:	Name of Lin	ited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please return all correspo	ondence concerning this matter	to the following:		
	Raymonde Charlier			
		Name of Person		
		Firm/Company		
	3661 W Forge Rd			
		Address		
	Davie, FL 33328			
		City/State and Zip Code	·	
•	ray@zabella.com			
For further information of	E-mail address: (concerning this matter, please c	to be used for future annual report not all:	ification)	
Raymonde Charlier		954 560-0234 at ()		
Name o	of Person		ne Telephone Number	
Enclosed is a check for t	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 tadditional copy is enclosed	
<u>Mailing Addres</u> Registration		<u>Street Address:</u> Registration Se	ection	
Division of Corporations		Division of Corporations		
P.O. Box 632 Tallahassee,		The Centre of Tallahassee 2415 N. Monroe Street, Suite 810		
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Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

PILED 2022 HAY 13 PH 12 SECRE JARY OF S

ZABELLA GLOBAL ENTERPRISES CORP

company has been notified in writing of this change.

(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 <u>1/26/2015</u>	and as great	
Florida document number P15000008111			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	ility company here:		
The new name must be distinguishable and contain the words "Limited Liabil	ity 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 a agent and/or the new registered office address here:	nddress on our records, <u>enter</u>	the name of the new registered	
Name of New Registered Agent:			
New Registered Office Address:			
	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 provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office	performance of my duties, an provided for in Chapter 605, I	nd I am familiar with and F.S. Or, if this document is	

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

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Raymonde Charlier	3661 W Forge Rd, Davie, FL 33328	■Add
			□Remove
			□ Change
MGR	Mario Nicolas	3661 W Forge Rd, Davie, FL 33328	Add
			□Remove
			☐ Change
			□ Add
)			□Remove
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ective date, if other than the d	ate of filing:		(ontional)	
ective date, if other than the d reflective date is listed, the date must te: If the date inserted in this bloo	be specific and cannot be prior.	to date of filing or more the	nan 90 days after filing.) P	ursuant to 605,0207
nument's effective date on the Dep			in an annual contract of the c	in the object and
cord specifies a delayed effective s filed.	date, but not an effective til	me, at 12:04 a.m. on th	e earlier of: (b) The (00th day after the
9th of May ed	2022			
		 2		
	ignature of a member or autho	ulier		
	ignature of a member or autho	rize d representative of a	member	
Raymonde Charlier				
**	Typed or printe	d name of signee	, <u></u>	

Filing Fee: \$25.00