P990000 145 23

		<u> </u>
(Requ	estor's Name)	
(Addre	ess)	
(Addre	ess)	
(City/S	State/Zip/Phone	- #1)
(Oily/C	xate/2ip/i non	
PICK-UP	☐ WAIT	MAIL
(Busin	ess Entity Nar	ne)
(Docu	ment Number)	
·	·	
Certified Copies	Certificates	of Status
Certified Copies	Certificates	01 018103
Special Instructions to Fili	ing Officer	





500440147315

11/25/24--01019--018 **35.08



COVER LETTER

TO:

Amendment Section Division of Corporations

SUBJECT: GLOBAL GARLIC INC. Name of Corporation
DOCUMENT NUMBER: <u>P99000014523</u>
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
HEISY KAMSLER
Name of Contact Person
GLOBAL GARLIC INC
Firm/Company
11501 NW 107TH ST
Address TE TE
MIAMI, FL 33178
Address MIAMI, FL 33178 City/State and Zip Code
HKAMSLER@DEMIPAIS.COM
HKAMSLER@DEMIPAIS.COM E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
HEISY KAMSLER at (954) 294-2747 Name of Contact Person Area Code & Daytime Telephone Number
Name of Contact Person Area Code & Daytime Telephone Number
Enclosed is a \$35.00 check made payable to the Department of State.
Mailing Address: Amendment Section Street Address: Amendment Section

Division of Corporations The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

CR2E045 (04/13)

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	nge is submitted for a	607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this corporation organized under the laws of the State of <u>Florida</u> ed office or registered agent, or both, in the State of Florida.
	he corporation: GLO	
2. The principal		DI NW 07TH ST SUITE 101 MIAMI, FL 33178
3. The mailing a	ddress (if different):	
		02/15/1999 Document number: P99000014523
5. The name and		urrent registered agent and registered office on file with the
	STEVEN J HENRIC	QUEZ CPA LLC
	5825 Sunset Dr 201	
	MIAMI, FL 33143	ew registered agent (if changed) and /or registered office 3
6. The name and (if changed):	street address of the n	
	HEISY KAMSLER	SUITE 101
	11501 NW 107 ST S	تَ اللهِ عَلَيْنَ عَ تَنْ عَلَيْنَ عَلَيْنَ عِلَيْنَ عَلَيْنَ عَلَيْنَ عَلَيْنَ عَلَيْنَ عَلَيْنَ عَلَيْنَ عَلَيْنَ عَلَيْنَ عَلَيْ
		P.O. Box NOT acceptable
	MIAMI, FL 33178	
The street addre as changed will	ss of its registered off be identical.	ice and the street address of the business office of its registered agent,
Such change was authorized by th	s authorized by resolu e board, or the corpor	ation duly adopted by its board of directors or by an officer so ration has been notified in writing of the change.
	1/5	RAFAEL VASQUEZ
Signatur	e of an officer or director	Printed or typed name and title
I hereby accept I further agree to of my duties, an document is bei- corporation has	the appointment as re o comply with the pro d I am familiar with a ng filed merely to refl been notified in writi	gistered agent and agree to act in this capacity, visions of all statutes relative to the proper and complete performance nd accept the obligation of my position as registered agent. Or, if this ect a change in the registered office address. I hereby confirm that the ng of this change.
Ilkamsler		11/21/2024
Sign	nature of Registered Agent	Date
If signing on be	half of an entity:	
HEISY KA	MSLER	
T	ped or Printed Name	

* * * FILING FEE: \$35.00 * * *