

L10000078160

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP  WAIT  MAIL

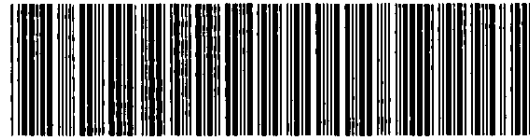
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

N. O'Connell AUG 10 2010

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** Freewire Technologies, LLC.  
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Brett Colton  
Name of Person

Freewire Technologies, LLC.  
Firm/Company

5749 Seminole Way  
Address

Hollywood, FL 33314  
City/State and Zip Code

Avi Ruimy @ Hotmail.com / colton Brett 72 @ hotmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Avi Ruimy (954) 2603847  
Brett Colton at (954) 2001469  
Name of Person Area Code & Daytime Telephone Number

Enclosed is a check for the 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 Section  
 Division of Corporations  
 P.O. Box 6327  
 Tallahassee, FL 32314

**STREET/COURIER ADDRESS:**  
 Registration Section  
 Division of Corporations  
 Clifton Building  
 2661 Executive Center Circle  
 Tallahassee, FL 32301




If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager  
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Jason Kaplan	4631 Windward Cove Lane Wellington, FL 33449	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
<del> </del>	<del> </del>	<del> </del>	<del><input type="checkbox"/> Add <input type="checkbox"/> Remove</del>
<del> </del>	<del> </del>	<del> </del>	<del><input type="checkbox"/> Add <input type="checkbox"/> Remove</del>
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<del> </del>	<del> </del>	<del> </del>	<del><input type="checkbox"/> Add <input type="checkbox"/> Remove</del>

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

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TALLAHASSEE, FLORIDA

Dated \_\_\_\_\_  
  
Signature of a member or authorized representative of a member  
Avi Ruimy  
BRETTON COLTON  
Typed or printed name of signee