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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

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(Business Entity Name)

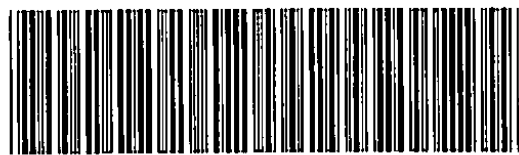
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OCT 04 2019

2019 OCT 20 PM 12:42

# COVER LETTER

TO: **Registration Section**  
**Division of Corporations**

SUBJECT: FTTX Broadband Solutions, 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:

Brian Shonk

\_\_\_\_\_  
Name of Person

FTTx Broadband Solutions, LLC

\_\_\_\_\_  
Firm/Company

6417 Granada Island Cove

\_\_\_\_\_  
Address

Apollo Beach, FL 33572

\_\_\_\_\_  
City/State and Zip Code

brian.shonk@gmail.com

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Brian D Shonk

\_\_\_\_\_  
Name of Person

at ( 812 ) 629-9837

\_\_\_\_\_  
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

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

2019 JUL 20 PM 12:00

FTTX BROADBAND SOLUTIONS, 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 8-27-2019 and as  
Florida document number L19000219272.

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

**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  
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 Zip Code

**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 con  
provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar w  
accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this do  
being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liab  
company has been notified in writing of this change.*

If Changing Registered Agent, Signature of New Registered A

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type</u>
AMBR	Pavel Pop-Buia	6417 Grenada Island Ave. Apollo Beach, FL 33572	<input checked="" type="checkbox"/> Ac
			<input type="checkbox"/> Re
			<input type="checkbox"/> Cl
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			<input type="checkbox"/> Re
			<input type="checkbox"/> Cl
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			<input type="checkbox"/> Ac
			<input type="checkbox"/> Re
			<input type="checkbox"/> Cl
			<input type="checkbox"/> A
			<input type="checkbox"/> Re
			<input type="checkbox"/> Cl

**D. If amending any other information, enter change(s) here:** *(Attach additional sheets, if necessary.)*  
Smart Communication Systems, LLC is a member of the LLC. Please add Smart Communication Systems as

a member of FTTX Broadband Solutions, LLC. The following is the information for Smart Communications

Smart Communication Systems, LLC

6417 Granada Island Cove

Appollo Beach FL 33572

9-17-2019

**E. Effective date, if other than the date of filing:** \_\_\_\_\_ **(optional)**

*(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 6*

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be li  
document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the ear  
(b) The 90th day after the record is filed.

Dated 9-17-2019 \_\_\_\_\_

*Brian D Shonk Jr*

\_\_\_\_\_  
Signature of a member or authorized representative of a member

Brian D Shonk Jr.

\_\_\_\_\_  
Typed or printed name of signee