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EXAMINER

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF COR	PORATION: NOMEL WIF	RELESS LLC	·
DOCUMENT NU	JMBER: L00000003884		
The enclosed Artic	cles of Amendment and fee a	re submitted for filing.	
Please return all co	orrespondence concerning thi	is matter to the following:	
SAI	NDRA PEREZ		
	(Name of Contact Person)		
РВ	A FINANCIAL SERVICE	S CORP	08 JUN 19 P
	(Firm/ Company)		
174	174 NE 96 STREET		08 JUN 19 PH 1: 1:3
		(Address)	
MIA	.MI SHORES, FLORIDA 331	138	ల
	(City/S	tate and Zip Code)	
For further inform	ation concerning this matter,	please call:	
SANDRA PEREZ at (305) 758-1136			
(Nam	e of Contact Person)	(Area Code & Daytime Telephone Number)	
Enclosed is a chec	k for the following amount:		
☑ \$35 Filing Fee	\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
P.O. Box 6	nt Section f Corporations	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Ci Tallahassee, FL 32301	ircle

ARTICLES OF AMENDMENT FOR NOMEL WIRELESS LLC

Pursuant to s.608.4081 Florida Statutes, corporation hereby submits the following Articles of Amendment for the purpose of amending its Articles of Organization.

1. The text of the amendment adopted is as follows:

Article V - Management

The company shall be managed by the members in accordance with regulations adopted by the members for the management of the business and affairs of the company. These regulations may contain any provisions for the regulation and management of the affairs of the company not inconsistent with law of these articles of organization. The name and addresses of the members of the company are:

> Augusto Bernardini 8745 Windsor Pointe Dr Orlando, Fl 32829 **MGRM**

Maria Elena Layrisso 8745 Windsor Pointe Dr Orlando, Fl 32829 MGRM

- 3. The date of adoption of this amendment was the 10th day of June, 2008
- 4. These articles will become effective upon filing with the office of the Scaretary of State of the State of Florida.