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2023 OCT -3 PM 3: 14

Y. SCOTT OCT 15 2023 T 239.642.1485 F 239.642.1487 E info@patrickneale.com www.patrickneale.com

Mailing: P.O. Box 9440 Naples, Florida 34101-9440



Naples: 5470 Bryson Court Suite 103 Naples, Florida 34109

Marco Island (by appointment): 950 North Collier Blvd, Suite 400 Marco Island, Florida 34145

September 29, 2023

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street. Suite 810
Tallahassee, FL 32303

Via Federal Express #773585792832

Re: Articles of Amendment – Wired for Growth LLC

SECRETARY OF STATE DIVISION OF CORPORATION OF CORPO

Gentlemen:

Enclosed herewith please find Articles of Amendment for the above LLC, in duplicate, changing the name to Hilliard Acquisitions LLC. Also enclosed please find our check in the amount of \$55.00 representing the required filing fee and Certified Copy.

Kindly process and provide us with the confirmation and certified copy as soon as possible. Should you require anything further, please contact the undersigned.

Very truly yours,

PHN:Jm Enclosure Ce client

COVER LETTER

Div	ision of Corp	porations					
SUBJECT:	Wired For C	Frowth LLC					
	Name of Limited Liability Company						
The enclosed	l Articles of A	Amendment and fee(s) are sub-	nitted for filing.				
Please return	all correspo	ndence concerning this matter t	to the following:				
		Patrick H. Neale					
			Name of Person				
		Patrick Neale & Associates	i		2		
			Firm/Company		2023 OCT	ISIAID SE	
		5470 Bryson Court, Suite I	03)CT -	ુર પ્ર 12 સ્ટ્રા 13 સ્ટ્રા	
			Address		ယ်		
		Naples, FL 34109			PH G	DF ST/	
		office@patrickneale.com	City/State and Zip Code		PM 3: 15	TIONS TREE	•
		- •	o be used for future annual report not	ification)			
For further in	nformation co	oncerning this matter, please ca	ill:				
Patrick Neal	e		239 642-1485				
	Name of	Person	at () Area Code Daytin	ne Telephone Number			
Enclosed is a	ı check for th	e following amount:					
□ \$25.00 F	filing Fee	S30.00 Filing Fee & Certificate of Status	■ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Certificate of Certified Cop (additional copy	Status &		
	iling Address		<u>Street Address:</u> Registration Sc	ection			

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Registration Section

TO:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

any as it now appears on our records.) Liability Company)		
Liability Company)		
y were filed on November 17, 2003	and assigned	
bility company here:		
oility Company," the designation "LLC" or the a	abbreviation "L.L.C."	
193 Madison Court		
Fort Myers Beach, FL 33931		
	ELVISION D 2023 OCT	
address on our records, enter the nar	TAR TAR TO STALL TO STALL THE CONTROL T	
	9 985	
Finter Florida street address		
, Florida	Zip Code	
	bility company here: ility Company," the designation "LLC" or the 193 Madison Court Fort Myers Beach, FL 33931 address on our records, enter the na	

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

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

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
			□ Add
			🗆 Remove
			Change
			□Add
			□Remove
			DINSECRETA
			THE CORPORATION OF THE CORPORATI
			🗆 Add
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			🗆 Add
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			Change

). If am	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)	
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	OCT	7
	± 627 3 027	
		0
	<u></u>	
(If an et <u>Note:</u>	September 29, 2023 (optional) ffective 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 605.0 If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed ment's effective date on the Department of State's records.	207 (3)(b) as the
f the reco ecord is f	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after tifled.	he
Dated	1 <u>9-29-24</u>	
	Signature of a member or authorized representative of a member	
	James R. Hittiard	
	Typed or printed name of signee	

Filing Fee: \$25.00