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J. SAULSBERRY EXAMINER

DEC 21 2011

## **COVER LETTER**

TO: Registration Division of C					
SUBJECT:	Mobi	ile Sonix LLC			
	Name of Lin	nited Liability Company			
The enclosed Articles	of Amendment and fee(s) are su	abmitted for filing.			
Please return all corres	pondence concerning this matte	er to the following:			
	_				
		Name of Person			
Mobile Sonix LLC Firm/Company				-	
13059 Penshurst Lane				ZOII DEC 19 PM 12:5	
		Address			~ }
		Windermere, FI 34786			
		City/State and Zip Code			
	E-mail address:	fox@mobilesonix.com (to be used for future annual report is	notification)	ORII	7
For further information	n concerning this matter, please			> -	
	Jennifer Fox	at ( <u>407</u> ) Area Code & Day	339-7717		
Name	e of Person	Area Code & Day	ytime Telephone Numb	er	
Enclosed is a check fo	r the following amount:				
<b>✓</b> \$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclo	osed) Certifie	iling Fee, cate of Status & ed Copy onal copy is enclo	osed)

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

2011 DEC 19 PM

( <u>Name of the Limiter</u>	Mobile So	onix LLC  ny as it now appears ( Liability Company)	on our records.)	19 PMIZ	
The Articles of Organization for this Limited L Florida document number	iability Company			23 ≥ and assig	ned,
This amendment is submitted to amend the foll	owing:				
A. If amending name, enter the new name o	f the limited liab	ility company here:			
The new name must be distinguishable and end wi "L.L.C."	th the words "Limi	ted Liability Company	" the designation '	LLC" or the abl	oreviation
Enter new principal offices address, if applic	13059 Penshurst Lane				
(Principal office address MUST BE A STREE	TADDRESS)	Windermere, Fl	34786		
		_			
Enter new mailing address, if applicable:	PO Box 947951				
(Mailing address MAY BE A POST OFFICE	Maitland, FL 32	794-7951			
B. If amending the registered agent and/ registered agent and/or the new registered of	or registered of Tice address here	fice address on our e:	records, enter	the name of	the new
Name of New Registered Agent:	Jennifer J. F	Jennifer J. Fox			
New Registered Office Address:	135059 Penshurst Lane  Enter Florida street address				
	1 8 1				
	VV	indermere City	, Florida	34786 Zip Code	<del></del>

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 608, 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 Changing Registered Agent, Signature of New Registered Agent

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

**Title** <u>Name</u> Address **Type of Action** MGRM Michael W. Fox 13059 Penshurst Lane ✓ Add Windermere, FL 34786 Remove Jennifer J. Fox MGRM 13059 Penshurst Lane Windermere FL 34786 Remove ☐ Remove Remove  $\square$ Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) December 13 2011 Dated \_\_\_\_ Signature of a member or authorized representative of a member Typed or printed name of signee

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Filing Fee: \$25.00