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2004 JUL 26	P 3: 43
SECRETARY (Requestor's Name)  (Requestor's Name)	OF SIME
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# TRANSMITTAL LETTER

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TO: Registration Sec Division of Corp	FILED  ZOON JUL 26 P 3		
SUBJECT: SKYLAN S	SWFL, LLC		2004 1111 0
SCHOLECT.	(Name of L	imited Liability Company)	SECRETARY OF STA TALLAHASSEE, FLOR
The enclosed Articles of	Amendment and fee(s) are su	abmitted for filing.	, LOK!
Please return all correspo	ndence concerning this matte	er to the following:	
Д	nthony Glenn Simpson		
		(Name of Person)	
<u>,</u>		(Firm/Company)	<u> </u>
4573 Exch	ange Ave.	(Address)	
		(Address)	
Nap	les, Florida 34104		
	(City	y/State and Zip Code)	
For further information of	oncerning this matter, please	call:	
Monika Altvate	r	at ( 239 ) 530-770	
	(Name of Person)	(Area Code & Daytime	e Telephone Number)
Enclosed is a check for the	following amount:		
€ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	<ul> <li>\$55.00 Filing Fee &amp;         Certified Copy         (additional copy is enclosed)</li> </ul>	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
τ			

STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399

## MAILING ADDRESS:

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

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

<b>√</b> SI	CYLAN SWFL, LLC			2004 JUL 26 P 3: 43
	(,£	(Present Nar A Florida Limited Liab	ne) ility Company)	SECRETARY OF STATE TALLAHASSEE, FLORIDA
FIRST:	The Articles of Organization we document number H04000001	ere filed on January :	21, 2004	and assigned
SECOND:	The following amendment(s) liability company:	to the Articles of	Organization was/w	ere adopted by the limited
The Hotzone Networks	e name of SKYLAN SWFLA, LL0 s SWFL, LLC shall be: 4573 Exc	C shall be changed to hange Ave. Naples, l	o HotZone Networks \$ Florida 34104	SWFL, LLC. The business address for
Dated July	20  Authory Signature of a	2004  Caustin member or authorized	representative of a mem	Manufer .
	Anthony Glenn Simpson	Typed or printed nam	e of signee	

Filing Fee: \$25.00