

L09000039199

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

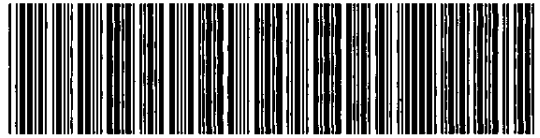
(Document Number)

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2010 JAN -7 AM 8:51  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

T. CLINE

JAN - 8 2010

EXAMINER



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

November 30, 2009

ALBERTO LUNA  
14861 SW 307 STREET  
HOMESTEAD, FL 33033

SUBJECT: L-COMM, LLC  
Ref. Number: L09000039199

We have received your document for L-COMM, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6020.

Tammi Cline  
Regulatory Specialist II

Letter Number: 509A00036622

2010 JAN -7 AM 9:51  
CLERK OF THE  
SUPREME COURT  
TALLAHASSEE, FLORIDA

7-11-09



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

December 23, 2009

ALBERTO LUNA  
14861 SW 307 STREET  
HOMESTEAD, FL 33033

SUBJECT: L-COMM, LLC  
Ref. Number: L09000039199

We have received your document for L-COMM, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6020.

Tammi Cline  
Regulatory Specialist II

Letter Number: 909A00039036

2010 JAN -7 AM 8:51  
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TALLAHASSEE  
FLORIDA  
SECRETARY OF STATE

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: L-Comm, 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:

Alberto Luna  
Name of Person  
Wide Scope Construction, LLC  
Firm/Company  
14861 SW 307 Street  
Address  
Homestead, FL 33033  
City/State and Zip Code  
seminoleange@gmail.com  
E-mail address: (to be used for future annual report notification)

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2010 JAN -7 AM 8:51  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

Alberto Luna at (305) 338 5293  
Name of Person 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)

check already sent.

**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**

L-Comm, 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 4/23/2009 and assigned  
Florida document number L09000039199

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

Wide Scope Construction, LLC

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

**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)

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2009 JAN -7 AM 9:51  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**B. If amending the registered agent and/or registered office address on our records, enter the name of the new 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 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

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

\_\_\_\_\_

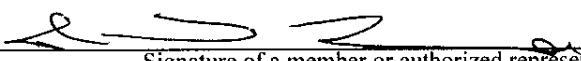
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\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Dated 12/28/09 . \_\_\_\_\_

  
Signature of a member or authorized representative of a member  
Alberto Luna  
Typed or printed name of signee

RECEIVED  
JAN - 7 AM 8:51  
CLERK OF SUPERIOR COURT  
CLERK OF SUPERIOR COURT  
CLERK OF SUPERIOR COURT