

L09000089236

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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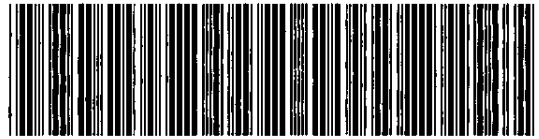
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
10 MAR 29 PM 4:18

T. HAMPTON

MAR 30 2010

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: We R Wireless 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:

Kathy A. Stegall
Name of Person

We R Wireless LLC
Firm/Company

702 Porta Rosa Circle
Address

St. Augustine Florida 32092
City/State and Zip Code

Kathystegall1@aol.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Kathy A. Stegall at (757) 515-5016
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)

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**

We R Wireless 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 Sept 16 2009 and assigned Florida document number L09000089236

This amendment is submitted to amend the following:

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

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)

2851 County Road 210 West
SUITE 117
ST. JOHNS FLORIDA 32259

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

702 Porta Rosa Circle
St. Augustine Florida 32092

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

Title	Name	Address	Type of Action
MGRM	Kathy A. Stegall	702 Poeta Rosa Circle ST Augustine Florida 32092	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGRM	^{S.} Micheal Miller		<input type="checkbox"/> Add <input type="checkbox"/> Remove
MGR	Bryan A Miller		<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

* The only changes that are being made is to add Kathy Stegall as a Managing Member - My sons Micheal and Bryan Miller are to continue in current status. Please call me 757-515-5016 with any further questions.

Dated March 25, 2010.

Kathy A. Stegall
Signature of a member or authorized representative of a member

Typed or printed name of signee

FILED
10 MAR 29 PM 4:10
SECRETARY OF STATE
DIVISION OF CORPORATIONS