L100000 76450

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SECRETARY OF STATE
TALLAHASSEE, FLORID

J. BRYAN AUG -9 2010 EXAMINER

COVER LETTER

TO: Registre	ation Section of Corporations
SUBJECT:	CLEAR FLORIDA WIRELESS LLC
SUBJECT:	Name of Limited Liability Company
The enclosed Art	icles of Amendment and fee(s) are submitted for filing.
Please return all	correspondence concerning this matter to the following:
**1	
	BRENT DEHOOP
	Name of Person
	Firm/Company 745 5
	File = Il es a de cia la
	540 E. HORATIO Ave Ste 100
	Address
,	MAITIAND, FL 32751
-	City/State and Zip Code
	E-mail address: (to be used for future annual report notification)
For further inform	nation concerning this matter, please call:
O	
<u>Brent</u>	<u>Settoop</u> at (407) 448-8971
	Name of Person Area Code & Daytime Telephone Number
_	
Fuctored is a che	ck for the following amount:
\$25.00 Filing	Fee \$\int_\$30.00 Filing Fee & \$\int_\$\$55.00 Filing Fee & \$\int_\$\$60.00 Filing Fee, Certificate of Status & Certificate of Status &
	(additional copy is enclosed) Certified Copy
	(additional copy is enclosed)
	MAILING ADDRESS: STREET/COURIER ADDRESS:
	Registration Section Registration Section
ž.	Division of Corporations P.O. Box 6327 Division of Corporations Clifton Building
•	Tallahassee, FL 32314 2661 Executive Center Circle
•	Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

CLEAR FLORIDA W	IRELESS LLC	on our records
(Name of the Limited Liability Con (A Florida Limited	ed Liability Company)	on our records.)
The Articles of Organization for this Limited Liability Comp	any were filed on	1421,2010 and assigned
Florida document number <u>L100000 76450</u>		
•	•	
-This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited l	iability company here:	}
HOUSE DEPOT LLC -	;	
The new name must be distinguishable and end with the words "L" "L.L.C."	Limited Liability Company	y," the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:		# 55 TO
(Frincipal office address MUST BE A STREET ADDRESS	<u></u>	500 直型
	1 	SE - D
Enter new mailing address, if applicable:		正少
(Mailing address MAY BE A POST OFFICE BOX)		081 3
		P
•		
B. If amending the registered agent and/or registered registered agent and/or the new registered office address		r records, enter the name of the nev
Name of New Registered Agent:		
	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·
New Registered Office Address:		
	Ente	r Florida street address
- <u> </u>	<u> </u>	, 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 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
		· .	Add
			Remove
• •	•	•	□ Add
-			Add Remove
•			
<u> </u>			Add Remove
** **	· · · · · · · · · · · · · · · · · · ·	·	*** -
 			Add Remove
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	- The state of the		AddRemove
	•		
			Add
			Remove
D. If amendir	ng any other information, enter chang	e(s) here: (Attach additional sheets, if necess	ary.)
			SECR
<u> </u>	and the second of the second o		AFFE AFFE
			-6 A
			F-0.
Dated	,	 	II: 37
_	Significant a member	or authorized representative of a member	
	BRENT DEHOUP	or authorized representative of a member MGRM or printed name of signee	
	Typed	or printed name of signee	<u>-</u>

Page 2 of 2

Filing Fee: \$25.00