

L10 0000131470

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

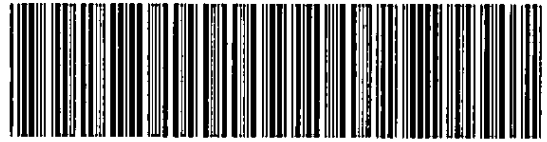
(Business Entity Name)

(Document Number)

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05/10/21--01026--026 \$25.00

DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

2021 MAY 10 PM 1:20

FILED

May 4th, 2021

Department of the Treasury
Internal Revenue Service
Cincinnati, OH 45999-0013

Re: Nation Wide Wireless LLC
3845 W Eau Gallie Blvd Suite 104
Melbourne, FL 32934
EIN: 27-4497094
NAME CHANGE

Sir/Madame:

I am sending you this communication subsequent to the name change of the above reference corporation.

Old name: Nation Wide Wireless, LLC

New name: Qawasmi & Sons, LLC

This name change has been made effective May 4th, 2021 in the state of Florida by filing an amendment to the Articles of Organization, pursuant to provisions of section 605.0202 of the Florida Statute.

If I can be of any further assistance to you in this matter, please do not hesitate to contact the undersigned,

Feras Alqawasmi, President



Cell: 914-316-6665

Frankqawasmi@gmail.com

FrankQawasmi@gmail.com

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: NATION WIDE 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:

FERAS ALQAWASMI
Name of Person
NATION WIDE WIRELESS LLC
Firm/Company
3845 W EAU GALLIE BLVD SUITE 104
Address
MELBOURNE, FL 32934
City/State and Zip Code
FRANKQAWASMI@GMAIL.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

AARON SLAGOSKI, EA 321 362-0981
Name of Person at () Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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 Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

NATION WIDE 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 12/27/2010 and assigned
Florida document number L10000131470.

This amendment is submitted to amend the following:

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

QAWASMI & SONS LLC

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

Enter new principal offices address, if applicable:

N/A

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

V

(Mailing address MAY BE A POST OFFICE BOX)

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:

N/A

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 605, 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 Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager

AMBR = Authorized 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"/> Change
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
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		_____	<input type="checkbox"/> Remove
		_____	<input type="checkbox"/> Change

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2021 MAY 10 AM 1:20
COUNTY OF ST. JAMES
TALLAHASSEE, FLORIDA

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

N/A

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2021 MAY 10 PM 1:20
CLERK OF THE COURT
ALLIANCE, FLORIDA

E. Effective date, if other than the date of filing: _____ **(optional)**

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated May 6 21 _____

Signature of a member or authorized representative of a member

FERAS ALQAWASMI

Typed or printed name of signee