

L110000037214

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

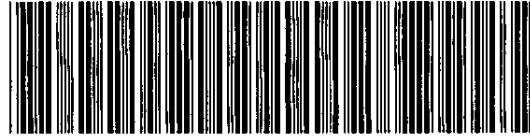
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

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07/27/15--01039--016 **25.00

FILED
2015 JUL 27 P 1:51
CLERK OF STATE
MONTGOMERY, ALA.

JUL 28 2015

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COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT:

Highwire 360, 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:

JUBAL IHMAN

Name of Person

Highwire 360, LLC

Firm/Company

1500 Cordova Road, Suite 214

Address

Fort Lauderdale, FL 33316

City/State and Zip Code

JUBAL@ADVANTAGESERVICES.NET

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JUBAL IHMAN

Name of Person

at (954) 527-0457

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

H103wire 360, LLC

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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> |
|--------------|-------------|-------------------------|--|
| MGRM | IT Squad | 1500 Cordova Rd | <input type="checkbox"/> Add |
| | | Suite 214 | <input checked="" type="checkbox"/> Remove |
| | | Ft lauderdale, FL 33316 | <input type="checkbox"/> Change |
| | | | <input type="checkbox"/> Add |
| | | | <input type="checkbox"/> Remove |
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[illegible]

(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)

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.

094 22, 2015 :
 Signature of a member or authorized representative of a member
 JUDAL I HMAN
 Typed or printed name of signee

Filing Fee: \$25.00

FILED
2015 JUL 27 P 1:57
CLERK OF DISTRICT COURT
STATE OF TEXAS
SAN ANTONIO, TEXAS