## 12000023243

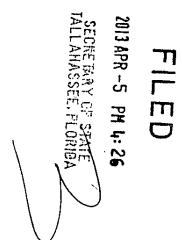
| (Re                                     | equestor's Name) |             |  |  |
|---|------------------|-------------|--|--|
| (Address)                               |                  |             |  |  |
| (Address)                               |                  |             |  |  |
| (City/State/Zip/Phone #)                |                  |             |  |  |
| PICK-UP                                 | ☐ WAIT           | MAIL        |  |  |
| (Business Entity Name)                  |                  |             |  |  |
| (Document Number)                       |                  |             |  |  |
| Certified Copies                        | _ Certificates   | s of Status |  |  |
| Special Instructions to Filing Officer: |                  |             |  |  |
|   |                  |             |  |  |
|   |                  |             |  |  |
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| l <u>.</u>                              |                  |             |  |  |

Office Use Only



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APR - 8 2013 J. BRYAN



## FLORIDA DEPARTMENT OF STATE Division of Corporations

March 13, 2013

HYRUM ESTRADA BUSINESS TEXT MESSAGING UNLIMITED 11120 CAMERON COURT SUITE 204 DAVIE, FL 33324

SUBJECT: BUSINESS TEXT MESSAGING UNLIMITED LLC

Ref. Number: L12000023243



We have received your document for BUSINESS TEXT MESSAGING UNLIMITED LLC and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

You completed the wrong form

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) 245-6051.

Joey Bryan Regulatory Specialist II

Letter Number: 813A00005912

Original letter sent to inform me that 1st application I submitted was the wrong One. Behind this pase is the correct form.

www.sunbiz.org

## **COVER LETTER**

| TO: Registration Section Division of Corporations   |
|---|
| SUBJECT: Business text Mussaging Unlimited  Name of Limited Liability Company   |
| $\cdot$   |
| The enclosed Articles of Amendment and fee(s) are submitted for filing.   |
| Please return all correspondence concerning this matter to the following:   |
| Hyrum Estrada  Name of Person  Business text messaging Unlimited in the   |
| BUSINSS Text Messaging Unlimited .  |
| Firm/Company  |
| 11/20 cameron curt Soit 201   |
| Address   |
| Davie FC 33324  |
| City/State and Zip Code  Hymm REStrada & Hot mail. com  E-mail address: (to be used for future annual report notification)  |
| For further information concerning this matter, please call:  |
| Hyrom Estrade a1 (954) 478-0599   |
| Name of Person Area Code & Daytime Telephone Number   |
|   |
| Enclosed is a check for the following amount:   |
| \$25.00 Filing Fee \$\ \begin{align*} |

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

Division of Corporation, Attached is the correct form 300 amend the name of my corporations.

I have included the cover letter things You sent me so as to avoid any Confusion. In the lover letter you mentioned that my check, the one that I originally sent by the wrong application was cushed almost. I was cushed already. to amount of \$43.75. In the New application that I sent There was no filing fee for that exact price, so I selected the \$30,00 filing fee oftion. So I am awd \$ 13.75, Can you please sent/refind me those \$13,75 mm in the form of achede mude at to my business Nume. If Here are an problems Please (all me at 954-478-0599. Hyrm Estrada 5 would of been caster to Just me back the check instead of distra (yehina

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

The Articles of Organization for this Limited Liability Company were filed on Florida document number \_\_\_\_\_\_L12000023243 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." Same Address on file 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) 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: Same Registered Asents Name of New Registered Agent: New Registered Office Address: Enter Florida street address

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.

City

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>  | Name | Address | Type of Action   |  |
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| D. If an | nending any other information, enter change(s) here: (Attach additional sheets, if necessary. | )         |
|----------|---|-----------|
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|          |   |           |
|          |   |           |
|          |   |           |
|          |   |           |
| Dated    | 3/30/13   | THE TO    |
| _        | Alex Experience   |           |
|          | Signature of a member or authorized representative of a member                                |           |
|          | Hyrum Estrada   |           |
|          | Typed or printed name of signee  Page 3 of 3  | LORING 26 |
|          | Filing Fee: \$25.00   | y         |