## L12000046418

•
(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:
, 

Office Use Only



900298521509

05/01/17--01019--023 \*\*25.00

MAY 0 2 2017 S. YOUNG SECRETARY OF STATE
TALLAHASSEE, FLORID.

17 MAY -1 PM 4: 43

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

TransPhoners.com LLC		
(Name of the Lin	ited Liability Company as it now appe (A Florida Limited Liability Company)	ars on our records.)
The Articles of Organization for this Limited lorida document number L12000046418	4/04/2012 and assigned	
his amendment is submitted to amend the fo	llowing:	
A. If amending name, enter the new name	of the limited liability company l	nere:
he 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 appl	cable:	
<u>Principal office address MUST BE A STRE</u>	ET ADDRESS)	25.5
Inter new mailing address, if applicable:  Mailing address MAY BE A POST OFFICE	<u> </u>	HAY-1 PM 4:
. If amending the registered agent and egistered agent and/or the new registered of	l/or registered office address of office address here:	n our records, enter the name of the new
Name of New Registered Agent:	Jason Souwed	
New Registered Office Address:	1143 Banks road	
_	Enter Flo	rida street address
	Margate	, 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>		Address	Type of Action	
MGR	Jason Souwed	1143 Banks Road Margate FL 3306	Add	
			□ Remove	
			■ Change	
			Add	
			Remove	
			Change	
			☐ Remove	
			☐ Change	
			<b></b>	
			Remove	
			Change	
			□ Remove	
			Change	
			Add	
			Remove	
			☐ Change	

	<del></del>					
				<u></u>		
	<del></del>		<u> </u>			
			·			
<del></del>			····		4	PEG.
						产品
-						3355
						2
<del></del>	<del></del>					E. F. L. L.S
			_			: <b>دن</b>
(If an effective date is I	other than the date of isted, the date must be speci	ific and cannot be prior	r to date of filing or mor	(optiona e than 90 days after filin	ng.) Pursuant to 605.	.0207 (3)(
document's effective	nserted in this block does we date on the Departmen	i not meet the applicant of State's records	able statutory ming i	equirements, this da	te will not be liste	u as ilic
						_
	fies a delayed effect after the record is f		ot an effective tir	ne, at 12:01 a.m	i. on the earlie	r of:
A		2017				
Dated April 28th						

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00