

L12000051400

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TALLAHASSEE, FLORIDA

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: High Tech Mobi, 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:

Victoria Fracassi

Name of Person

High Tech Mobi, LLC

Firm/Company

28870 US Hwy 19 North, Suite 300

Address

Clearwater, FL 33761

City/State and Zip Code

victoria@hightechmobi.com

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

For further information concerning this matter, please call:

Victoria Fracassi

Name of Person

at ( 727 ) 431-9576

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

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TALLAHASSEE, FLORIDA

High Tech Mobi, LLC

The Articles of Organization for this Limited Liability Company were filed on April 16, 2012 and assigned Florida document number L12000051400.

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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>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	Paul Wheeler	2677 ROWEL RU	<input type="checkbox"/> Add
		ST-LAZARE QUEBEC	<input checked="" type="checkbox"/> Remove
		CANADA J7T -2A1	
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

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

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Dated March 11, 2013.

Victoria Fracassi

Signature of a member or authorized representative of a member

VICTORIA FRACASSI

Typed or printed name of signee

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**Filing Fee: \$25.00**