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SECRETARY OF STATE DIVISION OF CORPORATIONS

N COOPER MAY 2 4 2018

COVER LETTER

	egistration Sec division of Corp				
our ·····	CITYCELLO	SSM, LLC			
SUBJECT	ı:	Name of Lim	nited Liability Company		
The enclos	sed Articles of A	mendment and fee(s) are sub	mitted for filing.		
Please retu	ım all correspon	dence concerning this matter	to the following:		
		MARIO L BENCOMO			
			Name of Person	1	
		MARGO BE	FICOMO	dopoop verified 05/21/18 11:24AM E01 (2G8Z-Y7PN-ERPZ-DE74	
			Firm/Company		
3020 NW 60TH ST BLDG G SUITE P					
			Address	···········	Takes !
		MIAMI FL 33166			
			City/State and Zip C	ode :	
		gpinto21@hotmail.com	· · · · · · · · · · · · · · · · · · ·		
For further	r information co	ncerning this matter, please c	to be used for future an all:	пия тероп поинся:	on)
MARIO L	BENCOMO		954 at (854-5359	
	Name of	Person	Area Code	Daytime Tel	lephone Number
Enclosed i	s a check for the	e following amount:			
\$25.00) Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Certified Cop (additional copy	у	□ \$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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

CITYCELLGSM, LLC			
(Nume of the Limi	ted Liability Company as it now ap (A Florida Limited Liability Compa	opears on our records.) (ny)	
The Articles of Organization for this Limited L. Florida document number L. 2000069974	Liability Company were filed or	n 05/24/2012 and assigne	:d
	·		
This amendment is submitted to amend the following	lowing:		
A. If amending name, enter the new name o	of the limited liability compan	iy here:	
_			
he new name must be distinguishable and contain the	words "Limited Liability Company,"	the designation "LLC" or the abbreviation "L.L.C."	14
Enter new principal offices address, if appli	cable:		
Principal office address MUST BE A STREE	ET ADDRESS)		ਛ :
			HAY
			¥Υ 23
Enter new mailing address, if applicable:			ــــــــــــــــــــــــــــــــــــــ
Mailing address MAY BE A POST OFFICE	<u> </u>		-
			<u></u>
B. If amending the registered agent and	d/or registered office addres	is on our records, enter the name of t	che ne
registered agent and/or the new registered (office address here:		
Name of New Registered Agent:	MARIO L BENCOMO		
New Registered Office Address:	8020 NW 60TH ST BLDG C	<u> </u>	
	Ente	r Florida street address	
	MIAMI	, Florida 33166	
	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.

MURSO BENCOMO GOZZIJA 11 ZAAN EDT EVDE-3300-VZW SOFS

If Changing Registered Agent, Signature of New Registered Agent

dotloop signature verification

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

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
MGR	FLAVIO ASSUNTO	8020 NW 60TH ST BLDG G	
		MIAMI, FL 33166	■ Remove
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		-	
			
12 1200 of the 10 of the	05/18/2018		
E. Effective date, if other than (If an effective date is listed, the date	the date of filing:e e must be specific and cannot be prior to	date of filing or more than 90 days	optional) after filing.) Pursuant to 605 0207 (
Note: If the date inserted in the	his block does not meet the applicate the Department of State's records.	ole statutory filing requirements	, this date will not be listed as t
Sirective duit Off L	spartment or state 8 records,		
If the record specifies a dela	ayed effective date, but not	an effective time at 120	ll am on the earlier of:
(b) The 90th day after the	record is filed.	on anacara anic, at 12.	, a same on the earlier or.
MAY 18	2018		
Dated MAY 18		- <i>*</i>	

Page 3 of 3

Typed or printed name of signee

MARIO L BENCOMO

Filing Fee: \$25.00