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COVER LETTER

TO:

	Registration So Division of Co				
SUBJEC		AR CITY LLC			
SUBJEC	· ! ·	Name of Limi	ted Liability Comp	any	.
The encle	osed Articles of	Amendment and fee(s) are sub	mitted for filing.		
		ondence concerning this matter	· ·		
		DAVOR JERKOVIC			13 FF
			Name of Perso	on .	AHASSI T
			Firm/Compan	У	PH 3: 17
		2066 SOUTH BELC	HER RD		OR THE
			Address		
		CLEARWATER, FL	33764		
		CELLCITYLLC@GM	City/State and Zip AIL.COM	Code	
		E-mail address: (t	o be used for future a	nnual report notificat	ion)
For furth	er information c	oncerning this matter, please c	all:		
DAVO	R JERKOVI	С	727	776-3716	
	Name o	f Person		a Code & Daytime Te	elephone Number
Enclosed	is a check for the	ne following amount:			
□ \$25.0	0 Filing Fee	■\$30.00 Filing Fee & Certificate of Status	□\$55.00 Filing Certified Co (additional		□\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Registr Divisio P.O. Bo	ING ADDRESS: ration Section on of Corporations ox 6327 assee, FL 32314	Re Di Cl	REET/COURIER gistration Section vision of Corporatio ifton Building 61 Executive Center	ons

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



CELLULAR CITY LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Compa	iny were filed on JANUARY 14th, 2013	and assigned
Florida document number	,	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited li	ability company here:	
The new name must be distinguishable and end with the words "Li "L.L.C."	mited Liability Company," the designation "LI	LC" or the abbreviation
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 registered agent and/or the new registered office address h	office address on our records, <u>enter there:</u>	e name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street addre	ess
	, 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 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.

If Changing Registered Agent, Signature of New Registered Agent

Page 1 of 3

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>	Type of Action
MĢR ———	DAVOR JERKOVIC	2066 S BELCHER RD	Add
		CLEARWATER, FL 33764	Remove
<u></u>			Add
			Remove
			Remove
			Add
			Remove
			Add
			Remove
 			Add
			Remove

•		
EBRUARY 5th	2013	
Paror Fer	,	

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Filing Fee: \$25.00