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T. BROWN

COVER LETTER

TO: Registration Section
Division of Corporations

Coastal Wireless 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:

David Finkelstein

Name of Person

Coastal Wireless LLC

Firm/Company

3914 NW 53rd Street

Address

Boca Raton, FL 33496

City/State and Zip Code

david@coastalwireless.us

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

For further information concerning this matter, please call:

David Finkelstein

₃₇561 **994-1477**

Name of Person

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)

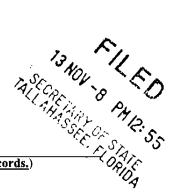
MAILING ADDRESS:

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



Coastal Wireless 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 Com | pany were filed on 8/23/2013 | and assigned | |
|---|---|------------------------------|--|
| Florida document number L13000121935 | | | |
| 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 "L.L.C." | Limited Liability Company," the designation | on "LLC" or the abbreviation | |
| Enter new principal offices address, if applicable: | | | |
| (Principal office address MUST BE A STREET ADDRES | <u>(S)</u> | | |
| Enter new mailing address, if applicable: | 3914 NW 53rd Street | | |
| (Mailing address MAY BE A POST OFFICE BOX) | Boca Raton, FL 33496 | | |
| B. If amending the registered agent and/or registered registered agent and/or the new registered office address | | ter the name of the new | |
| Name of New Registered Agent: | | | |
| New Registered Office Address: | | | |
| | Enter Florida street address | | |
| | , Florid | | |
| | City | Zip Code | |
| Now Degistered Agent's Signature if showing Degistered A. | cant. | | |

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 amending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager MGRM = Managing Member

| <u>Title</u> | Name | Address | Type of Action |
|--------------|-------------------|----------------------|----------------|
| MGMR | David Finkelstein | 3914 NW 53rd Street | ✓ Add |
| | | Boca Raton, FL 33496 | Remove |
| MGMR | Fred Galison | 2415 NW 31st Street | |
| | | Boca Raton, FL 33431 | Remove |
| | | | Add |
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| . If amending any other information, e | enter change(s) here: (Attach additional sheets, if necessary.) |
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| | |
| November 3 | 2013 |
| | Aux D |
| | of a member or authorized representative of a member |
| Mr. Emad Aovida | |
| | Typed or printed name of signee |

Page 3 of 3

Filing Fee: \$25.00