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February 24, 2014

SARAH COOPER 12222 S 1000 E STE 2 DRAPER, UT 84020

SUBJECT: WIT INTERNET VENTURES, LLC

Ref. Number: L13000166441

We have received your document for WIT INTERNET VENTURES, LLC and your check(s) totaling \$55.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Letter Number: 214A00004098

Deborah Bruce Regulatory Specialist II



FLORIDA DEPARTMENT OF STATE Division of Corporations

January 24, 2014

SARAH COOPER PRIME CORPORATE SERVICES, LLC 12222 S 1000 E STE 2 DRAPER, UT 84020

SUBJECT: WIT INTERNET VENTURES, LLC

Ref. Number: L13000166441

We have received your document for WIT INTERNET VENTURES, LLC and your check(s) totaling \$55.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Because articles of correction must be submitted within 30 business days of the filed date, the enclosed document cannot be filed and is being returned to you.

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Deborah Bruce Regulatory Specialist II

Letter Number: 314A00001646

COVER LETTER

Registration Section TO: **Division of Corporations**

WIT Internet Ventures, 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:

Sarah Cooper

Prime Corporate Services, LLC

12222 S 1000 E Ste 2

Draper, UT 84020

City/State and Zip Code

llcsupport@primecorporateservices.com

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

For further information concerning this matter, please call:

Sarah Cooper

 $_{at}$ (855) 577-4639

Daytime Telephone Number

Enclosed is a check for the following amount:

Name of Person

□ \$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**

(Name of the Limit	ed Liability Company as it now appe: (A Florida Limited Liability Company)	irs on our records.)
The Articles of Organization for this Limited L. Florida document number L13000166441	iability Company were filed on	December 2, 2013 and as
This amendment is submitted to amend the following	owing:	
A. If amending name, enter the new name of	f the limited liability company b	ere:
The new name must be distinguishable and end with the	words "Limited Liability Company," th	e designation "LLC" or the abbreviation '
Enter new principal offices address, if applic	able:	
(Principal office address MUST BE A STREE	T ADDRESS)	
	- the latest the same transfer	, <u>C</u>
Enter new mailing address, if applicable:		AH, A
(Mailing address MAY BE A POST OFFICE)	POV	25.5 4 5.5 5.5 5.5 5.5 5.5 5.5 5.5 5.5 5.5 5.5
	***************************************	17777 P
B. If amending the registered agent and/registered agent and/or the new registered of		[g: 3;
Name of New Registered Agent:	Wayne Tillman	
New Registered Office Address:	724 Crane Court	
	Enter Flo	rida street address
	Port Orange	, Florida32127
	City	Zip Code
New Registered Agent's Signature, if changing R	, , , , , , , , , , , , , , , , , , ,	

WIT Internet Ventures, LLC

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to com provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar wi accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this doc being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liabit company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Age

MGR = M AMBR = A	lanager Authorized Member		
<u>Title</u>	<u>Name</u>	Address	Type
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	Articles of Organization	r change(s) here: (Attach additional sheets, if necessary.) n to be corrected:
Ā	Article IV: Registered Agent I	ast name is spelled wrong; should be "Tillman"
Ā	Article V: First MGRM's last na	ame is spelled wrong should be "Tillman", second
ľ	MGRM name is spelled	l incorrectly; should be "llene Tillman"
E. Effectiv	ve date, if other than the date of fil	ing: (optional)
(The offer		date of receipt or filed date and cannot be more than 90 days after
(The offer	ctive date must be specific, cannot be prior to	date of receipt or filed date and cannot be more than 90 days after
(The effective the date	ctive date must be specific, cannot be prior to this document is filed by the Florida Departu	date of receipt or filed date and cannot be more than 90 days after ment of State)
(The effective the date	etive date must be specific, cannot be prior to this document is filed by the Florida Departs March 17	date of receipt or filed date and cannot be more than 90 days after ment of State)

Page 3 of 3

Filing Fee: \$25.00