

L14000014198

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

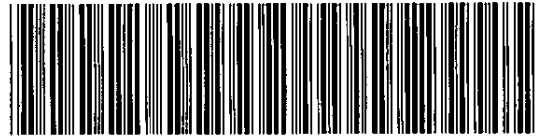
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

D. BRUCE  
JUN 12 2017

3/9

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: TLC WirelessServicesLLC

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:

LawrenceJ. Canatsey

Name of Person

TLC WirelessServicesLLC

Firm/Company

P.O. Box 636

Address

SorrentoFL 32776

City/State and Zip Code

larry.canatsey@tlcwirelesservices.com

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

For further information concerning this matter, please call:

LawrenceJ. Canatsey

407

947-9898

at ( )

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

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

TLC WirelessServicesLLC

(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 Company were filed on 1/27/2014 and assigned  
Florida document number L14000014198.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

N/A

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

**Enter new principal offices address, if applicable:** 25617PineValley Drive  
**(Principal office address MUST BE A STREET ADDRESS)** SorrentoFL 32776

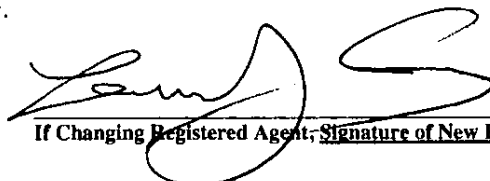
**Enter new mailing address, if applicable:** P.O.Box 636  
**(Mailing address MAY BE A POST OFFICE BOX)** SorrentoFL 32776

**B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:**

**Name of New Registered Agent:** LawrenceJ. Canatsey  
**New Registered Office Address:** 25617PineValley Drive  
*Enter Florida street address*  
Sorrento, Florida 32776  
*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.*

  
**If Changing Registered Agent, Signature of New Registered Agent**

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

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Tamara L. Canatsey	25617 Pine Valley Drive	<input type="checkbox"/> Add
		Sorrento, FL 32776	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Lawrence J. Canatsey	25617 Pine Valley Drive	<input checked="" type="checkbox"/> Add
		Sorrento, FL 32776	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

Dated June 3 2017

*Vollemer*

Signature of a member or authorized representative of a member

**Tamara L. Canatsey**

Typed or printed name of signee