## L14000/45006

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SECRETARY FLORID

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## COVER LETTER

TO:	Registration Se Division of Cor		•	4
SUBJ		Y WIRELESS LLC		
50194		Name of Lin	ited Liability Company	
The er	nclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please	return all correspo	ondence concerning this matter	to the following:	
			JORGE R CARO	
			Name of Person	
			SPEEDY WIRELESS LLC	
			Firm/Company	
		1	100 N MAIN ST SUITE 103	
			Address	
			BELLE GLADE FL 33430	
			City/State and Zip Code	
			jorge.caro56@yahoo.com	
		E-mail address: (	to be used for future annual report noti	lication)
For fu	rther information c	oncerning this matter, please c	all:	
	JORGE I	R CARO	561 829-8002	
	Name o	f Person	at () Area Code Daytim	e Telephone Number
Enclos	sed is a check for the	he following amount:		
□ \$2	5.00 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)
	MAII	INC ADDRESS <sup>3</sup>	STREET/COURT	ED ADDD \$55.

Registration Section
Division of Corporations

P.O. Box 6327 Tallahassee, FL 32314

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

## SPEEDY WIRELESS LLC

( <u>Name of the Limited Liability</u> (A Florida Li	Company as it now appears on our records.) imited Liability Company)
The Articles of Organization for this Limited Liability Con Florida document number <u>L14000145006</u>	npany were filed on SEPTEMBER 16, 2014 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited	d liability company here:
The new name must be distinguishable and contain the words "Limited	d Liability Company," the designation "LLC" or the abbreviation "L L.C"
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRES	SS) ASS
Enter new mailing address, if applicable:	AHASSEE
(Mailing address MAY BE A POST OFFICE BOX)	2: 39 FLORID
B. If amending the registered agent and/or register registered agent and/or the new registered office address	red office address on our records, <u>enter the name of the new</u> ss here:
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
	, Florida City Zip Code
New Registered Agent's Signature, if changing Registered A	Agent:
provisions of all statutes relative to the proper and comaccept the obligations of my position as registered agei	nd agree to act in this capacity. I further agree to comply with the applete performance of my duties, and I am familiar with and nt as provided for in Chapter 605. F.S. Or. if this document is office address. I hereby confirm that the limited liability
·	If Changing Registered Agent, <u>Signature of New Registered Agent</u>

MGR = M $AMBR = M$	lanager Authorized Member		
<u>Title</u>	Name	Address	Type of Action
AMBR	ISMAEL C DELGADO	13548 75th LANE NORTH	<b>■</b> Add
		WEST PALM BEACH FL 33412	☐ Remove
			☐ Change
			□ Add
			□ Remove
			☐ Change
			Add
			AR BRemove
			ASSE Change
			F STATE FLORIDA
			☐ Remove
			Change
		Remove	
			☐ Change
		_	Add
			□ Remove
			□ Change

D. If amen	ding any other information, ente	r change(s) here: (Attach additional sheets, if n	ecessary.)	
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(If an effective Note: It		and cannot be prior to date of filing or more than 90 days at of meet the applicable statutory filing requirements, t		
	ord specifies a delayed effectiv 90th day after the record is file	re date, but not an effective time, at 12:01 ed.	a.m. on the earlier o	of:
Dated _	JUNE I.	2015		
	Jac C	of a member or authorized representative of a member  R IALO  Typed or printed name of signee	15 JU SECRITALLA	
	Signature o	of a member or authorized representative of a member	N-5 HASS	
	JORGE	Typed or printed name of signee	mo z m	
			2: 39 2: 39 STATE	
		Page 3 of 3	A	

Filing Fee: \$25.00