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SECRETARY OF STATE

IN OF THE PRICE

## **COVER LETTER**

TO: Registratio Division of	n Section Corporations					
	EDY WIRELESS LLC					
SUBJECT:	Name of Lim	ited Liability Company				
	s of Amendment and fee(s) are sub					
	MADAY A	LVAREZ CANALES				
		Name of Person				
	SPEEDY	WIRELESS LLC				
	Firm/Company					
	1100 N M	IAIN STREET SUITE 103				
	<del>.</del>	Address				
	. BELI	LE GLADE, FL 33430				
		City/State and Zip Code	· <del></del>			
		SPEEDYWIRELESS2726@GMAIL.COM				
	E-mail address; (	to be used for future annual report notifi	cation)			
For further information	on concerning this matter, please ca	all:				
MADAY AL	VAREZ CANALES	561 829-8002				
Name of Person		at () Area Code Daytime	Telephone Number			
Enclosed is a check f	For the following amount:					
□ \$25.00 Filing Fc	e \$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)			
M	AILING ADDRESS:	STREET/COURIE				

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 Compa</u> (A Florida Limited I	ny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number L14000145006	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 liab	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "LLC" or the abbr	eviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)	<b>_\tag{\tau}</b>	
	<u>ئ</u>	
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Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		7
	3	*
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here  Name of New Registered Agent:  New Registered Office Address:		ne name of the
TO TORNOLD OTHER TRANSPORT	Enter Florida street address	
	, Florida	<u> </u>
	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>	Address	Type of Action
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Filing Fee: \$25.00