# L1500000a219

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SECRETARY OF STATE TALL AHASSEE. FLORID

MAR 0 5 2015 J. HARRIS

## COVER LETTER

	stration Sect sion of Corpo		,	
SUBJECT:	5G Techno	ology LLC		
SUBJECT		Name of Limi	ted Liability Company	
The enclosed	Articles of Ar	mendment and fee(s) are subr	nitted for filing.	
Please return	all correspond	lence concerning this matter t	to the following:	
		John Davis		
		,	Name of Person	
		5G Technology LLC		
			Firm/Company	
		PO Box 6		
			Address	<del></del>
		Pinellas Park, FL337	'81	
			City/State and Zip Code	
		contact@fivegtechnol	•	
For forther in	fammatian aan	E-mail address: (t cerning this matter, please ca	o be used for future annual report notif	cation)
ror turther in	tormation con	cerining this matter, please ca	ш.	
John	Davis Name of P	erson	at ( <u>727</u> ) <u>417 - 00'</u> Area Code Daytime	Telephone Number
Enclosed is a	check for the	following amount:		
\$25.00 Fi	ling Fee	□ \$30.00 Filing Fee & Certificate of Status	□ S55.00 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

5G Technology LLC	ited Linkiller Compa	and the party of t	anda V
(Mame of the Lin	(A Florida Limited)	any as it now appears on our reco Liability Company)	<u>Irus.</u> )
The Articles of Organization for this Limited Florida document number L15000002219	Liability Company	were filed on 01/06/2015	and assigned
This amendment is submitted to amend the fo	llowing:		
A. If amending name, enter the new name	of the limited liab	oility company here:	
The new name must be distinguishable and end with the	e words "Limited Liab	pility Company," the designation "	LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if appl		5745 Park Blvd. Nortl	
(Principal office address MUST BE A STRE	ET ADDRESS)	Pinellas Park, FL 337	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	F ROY)	5G Technology PO Box 6	23 PM 3: ARY OF STA ASSEE, FLOR
Muning universe MAT BL AT OST OFFICE	<u> 2                                   </u>	Pinellas Park, FL 337	<u> </u>
B. If amending the registered agent and registered agent and/or the new registered agent and Name of New Registered Agent:		<u>:e</u> :	rds, <u>enter the name of the ne</u>
New Registered Office Address:	5745 Park l	Blvd. North	
New Registered Office Address.	<del> </del>	Enter Florida street add	ress
	Pinellas Pa	rk	Florida 33781
	·	City	Zip Code
New Registered Agent's Signature, if changing	Registered Agent:	<u>.</u>	
I hereby accept the appointment as register provisions of all statutes relative to the pro			

Page 1 of 3

If Changing Registered Agent, Signature of New Registered Agent

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.

<del></del>	
	······································
fective	date, if other than the date of filing: (optional)
	date, if other than the date of filing:
the date th	is document is filed by the Florida Department of State)
the date th	February 19 <sup>th</sup> , 2015
he date th	is document is filed by the Florida Department of State)
	February 19 <sup>th</sup> , 2015

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Filing Fee: \$25.00

2015 FEB 23 PM 3: 20
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