250000/1638

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COVER LETTER

TO:

	Registration Se Division of Cor							
eup ucc	CITYCELL	CITYCELLGSM III, LLC						
SUBJEC	.1:	ited Liability Company						
The enclo	osed Articles of	Amendment and fee(s) are sub	mitted for filing.					
Please re	turn all correspo	ndence concerning this matter	to the following:					
		MARIO L. BENCOMO	,					
			Name of Person Firm/Company					
		14305 STIRLING RD	, min company					
Address								
		SOUTHWEST RANCHES	5. FL 33330					
			City/State and Zip Code					
		mario_lennoxb@hotmail.co						
For furth	er information c	E-mail address: (oncerning this matter, please c	to be used for future annual report notification)					
		oncerning this matter, piease co						
MARIO L. BENCOMO Name of Person			786 630-1372 at ()					
			Area Code Daytime Telephon	e Number				
Enclosed	is a check for th	ne following amount:						
≣ \$25.6	00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	Certified Copy (additional copy is enclosed)	660.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)				
Mailing Address:		<u>s:</u>	Street Address:					
Registration Section Division of Corporations			Registration Section Division of Corporation	S				
P.O. Box 6327			•	The Centre of Tallahassee				
Tallahassee, FL 32314			2415 N. Monroe Street, Suite 810					

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

 \approx

CITYCELLGMS III, LLC				
(Name of the Lim	ited Liability Comp (A Florida Limited	any as it now appears Liability Company)	on our records.)	
The Articles of Organization for this Limited Florida document number L15000011638		y were filed on $\frac{01/26}{1}$	0/2015	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	<u>e</u> :	
The new name must be distinguishable and contain the	words "Limited Liabi	ility Company," the desi	ignation "LLC" or the abb	previation "L.L.C."
Enter new principal offices address, if appli	8131 NW 68th Str	reet		
(Principal office address MUST BE A STRE	Miami, FL 33166			
			7.	
Enter new mailing address, if applicable:		8131 NW 68th Street		
(Mailing address MAY BE A POST OFFICE	Miami, FL 33166			
B. If amending the registered agent and/or agent and/or the new registered office addre	registered office : ess here:	address on our reco	ords, <u>enter the name</u>	of the new registere
Name of New Registered Agent:	MARIO L. BENCOMO			
New Registered Office Address:	8131 NW 68th	Street		
	Miami	·	, Florida ³³¹⁶	56
		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>	Name	Address	Type of Action
AM	MARIO L. BENCOMO	8131 NW 68TH STREET	
		MIAMI, FL 33166	□Remove
			⊟ Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			Change
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			Remove
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			□Remove
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			□Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) E. Effective date, if other than the date of filing:
(If an effective date is listed, the date must be according) _ (optional) (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) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. 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

E. Effective date, if other than the date of filing:

(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

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as document's effective date on the Department of State's records.

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 filled.

Dated

July 07

2020

Signature of a member or authorized representative of a member

MARIO L BENCOMO

Typed or printed name of signee

Filing Fee: \$25.00