L500011616

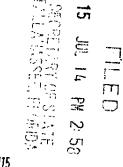
(Re	equestor's Name)) '
(Ad	idress)	
(Ac	ldress)	
(Cit	ty/State/Zip/Phor	ne #)
PICK-UP	☐ WAIT	MAIL
(Ві	usiness Entity Na	ime)
(Do	ocument Number	7)
Certified Copies	_ Certificate	es of Status
Special Instructions to	Filing Officer:	

Office Use Only



300274604813

07/14/15--01013--015 **25.00



JUL 1 5 2015

*

S. YOUNG

COVER LETTER

Div	ision of Corp	orations		
SUBJECT:		ELESS 10, LLC.		
SOBSECT,		Name of Limi	ited Liability Company	
The enclosed	Articles of A	mendment and fee(s) are sub-	mitted for filing.	
Please return	all correspon	dence concerning this matter	to the following:	
		MOHAMMED MIAH		
			Name of Person	
		MIAH WIRELESS 10, LL	C.	
			Firm/Company	
			Address	
		ORLANDO, FL 32809		一位 经内置 可
			City/State and Zip Code	福 三 后
		russell_fl@hotmail.com		
For further in	nformation co	n-man address: (oncerning this matter, please ca	to be used for future annual report notificall:	cation) In S 2 2
МОНАММ	ED MIAH		407 666-7851	';⊅
	Name of	Person		Telephone Number
Enclosed is a	a check for th	e following amount:		
■ \$25.00 F	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:

TO:

Registration Section

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

MIAH WIRELESS 10, LLC.			
(Name of the Limit	ed Liability Con (A Florida Limit	npany as it now appears on our recorded Liability Company)	<u>s.</u>)
The Articles of Organization for this Limited L	iability Compa	ny were filed on	and assigned
Florida document number L15000111616	•		
This amendment is submitted to amend the following	owing:		
A. If amending name, enter the new name o	f the limited li	ability company here:	
N/A			
The new name must be distinguishable and contain the v	ords "Limited Li	ability Company," the designation "LLC	" or the abbreviation "L.L.C."
Enter new principal offices address, if applic	able:	5105 SILVER STAR RD	
Principal office address MUST BE A STREE	T ADDRESS		
		ORLANDO, FL 32808	1500
Enter new mailing address, if applicable:		N/A	
(Mailing address MAY BE A POST OFFICE BOX)			7 7 0
			7.4.70
			व्या ज
B. If amending the registered agent and registered agent and/or the new registered or			s, enter the name of the n
Name of New Registered Agent:	N/A		
New Registered Office Address:			
		Enter Florida street addres	T.S.
•		. Fl	orida
		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
	N/A		Add
			Remove
			Change
			□ Add
			Remove
			@hange
			——————————————————————————————————————
			☐ Change
			□ Add
			Remove
			☐ Change
			□ Add
			Remove
			Change
			Add
			□ Remove
			Change

N/A, ,				
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
				
				
•				
				
				
			-	
		_		
				
				•
at dear to at each at	dea cons		<i>(</i> .•	N.1
tive date, if other than the frective date is listed, the date mu	e date of thing: ust be specific and cannot be pr	ior to date of filing or	more than 90 days after f	lling.) Pursuant to 605
If the date inserted in this b	plock does not meet the app	dicable statutory fili	ng requirements, this o	late will not be list
ment's effective date on the [Department of State's recor	ds.		53 5
				語気を
ecord specifies a delaye	ed effective date, but	not an effective	time, at 12:01 a.	m. on the earlie
e 90th day after the red	cord is filed.			വൃഗ 🕦
				- 25 B
d	2015			
·	,	·		
Malan	10 10			
Mohamo	Signature of a member or an	Ithorized representativ	e of a member	

Page 3 of 3

Filing Fee: \$25.00