## 11700021324

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2011 APR 19 PM 4: 55

SECRETARY OF STATE
SECRETARY OF STATE

K. SALY APR 1 9 2017



February 22, 2017

CITRUS CELLULAR PNONES, LLC RYAN W MOORE 3810 E GULF TO LAKE HWY, UNIT 10 INVERNESS, FL 34453

SUBJECT: CITRUS CELLULAR PHONES, LLC

Ref. Number: L17000021324

We have received your document for CITRUS CELLULAR PHONES, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Letter Number: 417A00003477

Karen A Saly Regulatory Specialist II

www.sunbiz.org

## **COVER LETTER**

TO: Registration Section Division of Corpo			
SUBJECT: Citrus	Cellular Phones, I	LLC	
Sobober.		ed Liability Company	
The enclosed Articles of Ar	nendment and fee(s) are subm	nitted for filing.	
Please return all correspond	ence concerning this matter to	o the following:	
	Ryan W Mod	ore	
		Name of Person	
	Citrus Cellula	ar Phones, LLC	
		Firm/Company	
	3810 E G	ulf to Lake Hwy. Un	it 10
		Address	
	Inverness	s, Fl 34453	
		City/State and Zip Code	
	Krypton24@liv	/e.com  be used for future annual report not	ification
For further information con-	cerning this matter, please cal		vanor,
Ryan W Moore		at ( 352) 613-2	2178
Name of P	erson		ne Telephone Number
Enclosed is a check for the	following amount:		
■ \$25.00 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)

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

FILED
2017 APR 19 PM 4: 53
SECRETARY OF STA

Citrus Cellular Phones	s, LLC	SECRETARY PM 4: 55
Citrus Cellular Phones (Name of the Limited Linb (A Flori	ility Company as it now appears on ida Limited Liability Company)	OUT records. ALLAHASSEE, FLORIDA
The Articles of Organization for this Limited Liability Florida document number <u>L1700002132</u> 4		uary 2017 and assigned
This amendment is submitted to amend the following:		
A. If amending name, <u>enter the new name of the li</u>	mited liability company here:	
The new name must be distinguishable and contain the words "Li	imited Liability Company," the design	ation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	***************************************	
(Principal office address MUST BE A STREET ADL	ORESS)	
	100	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or reg registered agent and/or the new registered office ad		r records, <u>enter the name of the nev</u>
Name of New Registered Agent:	70.0	<u> </u>
New Registered Office Address:		
	Enter Florida si	reet address
		, Florida
	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
MGR	Ryan W Moore	3810 E Gulf to Lake Hwy. Unit 10	<b>⊠</b> Add
		Inverness, Fl 34453	Remove
			Change
MGR	Elaine F Moore	3810 E Gulf to Lake Hwy. Unit 10	Add
		Inverness, FI 34453	<b>⊠</b> Remove
			Change
AMBR	Elaine F Moore	3810 E Gulf to Lake Hwy. Unit 10	<b>⊠</b> Add
		Inverness, Fl 34453	□ Remove
			□ Change
<del></del> .			□ Add
		SECRETARY OF TALLAHASSEE.	Remove
		FLORIDA	上译Add C
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Effectiv	e date, if other than the date of tive date is listed, the date must be specif	iling:		(optional)	
Note: If	f the date inserted in this block does	not meet the applic	able statutory filing requi	n 90 days after filing.) Pur irements, this date will	suant to 605,0207 (3 not be listed as the
documer	nt's effective date on the Departmen	of State's records		, · · · · · · · · · · · · · · · · · · ·	
he reco ۲he C	ord specifies a delayed effecti 90th day after the record is fi	ve date, but no	t an effective time,	at 12:01 a.m. on	the earlier of:
1110 2			•		
Dated	4-17-17				
Daicd	Ryn MC Signature		•		•

Page 3 of 3

Filing Fee: \$25.00