

L17000133914

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

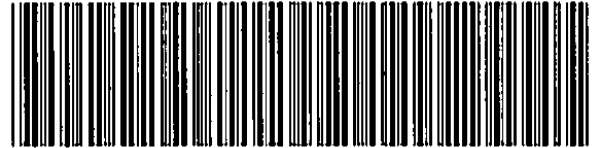
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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FALLS CHURCH, VA

OCT 16 2019

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SAMA WIFI LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

JOSE MAURICIO BELLO

Name of Person

JOSE MAURICIO BELLO, P.A.

Firm/Company

1290 WESTON ROAD, SUITE 220

Address

WESTON, FL, 33326

City/State and Zip Code

amendiola@samawifi.com.mx

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JOSE MAURICIO BELLO 954 314-7915
Name of Person at () Area Code Daytime 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

TO
ARTICLES OF ORGANIZATION
OF

SAMA WIFI LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 06/20/2017 and assigned
Florida document number L17000133914.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, enter the name of the
registered agent and/or the new registered office address here:

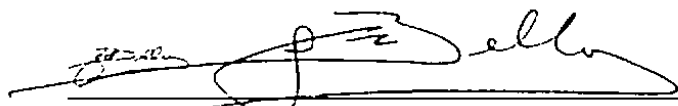
Name of New Registered Agent: JOSE MAURICIO BELLO, P.A.

New Registered Office Address: 1290 WESTON ROAD, SUITE 220,
Enter Florida street address

WESTON, Florida 33326
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

or removed from our records:

MGR = Manager
AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Ac</u>
MGR	CONQUISTADOR ENGINEERED SOLUTIONS.		☐ Add
		REMOVE THIS MANAGER	☒ Remove
			☐ Change
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			☐ Change

[illegible]

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

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.

(b) The 90th day after the record is filed.

Dated Sep 10, 2019 , _____

Arón Mendiola

Signature of a member or authorized representative of a member

SAMA WIFE SA DE CV (MGR) ITS AGENT JOSE A MENDIOLA

Typed or printed name of signee