

LI 7000192215

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2019 JUN 18 PM 12:41
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JUN 18 2019

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: FLORIDA COMMUNICATION CONTRACTORS, 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:

JAMES MILLER

Name of Person

MILLER LEGAL, P.L.

Firm/Company

1665 PALM BEACH LAKES BLVD, STE 101

Address

WEST PALM BEACH, FL 33401

City/State and Zip Code

JMILLER@MILLERLEGAL.PL.COM

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

For further information concerning this matter, please call:

JAMES MILLER

Name of Person

at (561)

Area Code

296-3252

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

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JUN 18 PM 12:41

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

FLORIDA COMMUNICATION CONTRACTORS, 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 9/14/2017 and assigned
Florida document number L17000192215

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 new registered agent and/or the new registered office address here:

Name of New Registered Agent:

James Miller

New Registered Office Address:

1065 Palm Beach Lake Blvd Ste. 101

Enter Florida street address

WFB

City

Florida 33461

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

Title	Name	Address	Type of Action
MGR	DUSTIN ERTLE	13860 WELLINGTON TRACE #38-262 LOXAHATCHEE, FL 33414	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Change
MGR	TIMOTHY HICKS	13860 WELLINGTON TRACE #38-262 LOXAHATCHEE, FL 33414	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove <input type="checkbox"/> Change <input type="checkbox"/> Add
			<input type="checkbox"/> Remove 2019 JUL 18 11:11 AM <input type="checkbox"/> Change 2019 JUL 18 11:12 AM <input type="checkbox"/> Add 2019 JUL 18 11:12 AM <input type="checkbox"/> Remove <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Change

APPROVED

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

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2019 JUN 18 PM 12:41

F. Effective date, if other than the date of filing: JUNE 18, 2019 (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 record is filed.

Dated JUNE 18, 2019

Signature of a member or authorized representative of a member

JAMES MILLER

Typed or printed name of signee