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(Requ	uestor's Name)	
(Addr	ess)	-
(Addr	ess)	
(City/	State/Zip/Phon	e #)
PICK-UP	MAIT	MAIL
(Busi	ness Entity Na	me)
(Doct	ument Number))
Certified Copies	Certificate	s of Status
Special Instructions to Fi	lling Officer:	

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SECRETARY OF STATE DIVISION OF CORPORATION

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COVER LETTER

ΓΟ: Registration Se Division of Cor			
Network M	Mobility Solutions LLC		
SUBJECT:	Name of Limi	ted Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub-	nitted for filing.	
Please return all correspo	ondence concerning this matter t	to the following:	
	William Voight		
	-	Name of Person	
	Voight, PA		
		Firm/Company	
	7680 Universal Blvd, Ste	565	
		Address	
	Orlando, FL 32821		
		City/State and Zip Code	
	geoffry@myvoight.com		
		to be used for future annual report notific	ration)
For further information of	concerning this matter, please ca	all:	
Geoffry Andrews		407 477-4559	
Name o	of Person	Area Code Daytime	Telephone Number
Enclosed is a check for t	he following amount:		
≦ S25.00 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:

TO:

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

Network Mobility Solutions LLC		
(Name of the Limited Liability Com (A Florida Limite	pany as it now appears on our records.) d Liability Company)	
The Articles of Organization for this Limited Liability Compared for the Articles of Organization for this Limited Liability Compared for the Articles of Organization for this Limited Liability Compared for the Articles of Organization for this Limited Liability Compared for the Articles of Organization for this Limited Liability Compared for the Articles of Organization for this Limited Liability Compared for the Articles of Organization for this Limited Liability Compared for the Articles of Organization for this Limited Liability Compared for the Articles of Organization for the	ny were filed on 5/22/2018	and assigned
his amendment is submitted to amend the following:		
Ž		
A. If amending name, enter the new name of the limited li	ability company here:	
he new name must be distinguishable and contain the words "Limited Lia	shility Company," the designation "LLC" or	r the abbreviation "L.L.C."
Inter new principal offices address, if applicable:		· · · · ·
Principal office address MUST BE A STREET ADDRESS)		
		78 × SE
inter new mailing address, if applicable:		- 6 OF CR
Mailing address MAY BE A POST OFFICE BOX)		19
		US FA
		39
 If amending the registered agent and/or registered egistered agent and/or the new registered office address h 		enter the name of the ne
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Flori	da
	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
MGR	LHL Group LLC		Add
		<u>,200,</u>	■ Remove
			☐ Change
MGR	LHL Holdings LLC	10311 Orangewood Blvd	Add
		Orlando, FL 32821	Remove
			☐ Change
			Add
			□ Remove
			Change
			Remove
			Change
			Add
			□ Remove
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fective date, if other than the date of	filing:		(optional)	
ffective date, if other than the date of an effective date is listed, the date must be spec- ote: If the date inserted in this block does	fic and cannot be prio	r to date of filing or more the	an 90 days after filing.) Purs	mant to 605.02
ocument's effective date on the Departme	t of State's records		direments, this date will	not be listed :
e record specifies a delayed effect The 90th day after the record is t	ive date, but no	ot an effective time	, at 12:01 a.m. on t	he earlier
The sour day dite; the record is	neu.			
July 11	2018			
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		orized representative of a r	`	