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(Re	equestor's Name)	
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COVER LETTER

ТО:	Registration Se Division of Cor			
enn ne		munications, LLC		
SUBJE((. I :	Name of Lim	ited Liability Company	
The enc	losed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please r	eturn all correspo	ndence concerning this matter	to the following.	
		Bradley D. Atkins		
		Lunix Communications	Name of Person	
			Firm/Company	
		15061 63rd Place North		
			Address	
		Loxahatchee, FL, 33470		
		Bradley.Atkins@Lunixcomm	City/State and Zip Code nunications.net	
		E-mail address: (to be used for future annual report notif	ication)
For furt	her information e	oncerning this matter, please or	all:	
Bradle	y Atkins		561 414-0143	
	Name o	f Person	Area Code Daytime	: Telephone Number
Enclose	d is a check for th	ne 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)
		ING ADDRESS:	STREET/COURI Registration Section	

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

Lunix Communications, LLC			_
(Name of the Limited Liability Co	mpany as it now appears of ited Liability Company)	O RYA DIES (Lancourage of the control of the contro	Allegy
The Articles of Organization for this Limited Liability Comp Florida document number L19000078689	any were filed on 03/28	3/2019 LALLARIASS.	assigned ''' EMEGMUA
Florida document number			
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 I	iability Company," the desi	gnation "LLC" or the abbreviation	"L.L.C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS	<u></u>		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			<u> </u>
inding dadress MAT BE AT OST OFFICE BOXY			
		·	
B. If amending the registered agent and/or registered	d office address on o	our records, enter the nar	ne of the ne
registered agent and/or the new registered office address		.	
Name of New Registered Agent:			
N 0 1 100 AH			
New Registered Office Address:	Enter Florida	a street address	
		F1 + 1	
		Florida Zip Cr	nde
New Registered Agent's Signature, if changing Registered Ag	•	•	
I hereby accept the appointment as registered agent and	agree to act in this ca	pacity. I further agree to co	omply with the
provisions of all statutes relative to the proper and comp accept the obligations of my position as registered agent			
being filed to merely reflect a change in the registered of	fice address, I hereby	confirm that the limited lia	bility

If Changing Registered Agent, Signature of New Registered Agent

company has been notified in writing of this change.

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>	<u>Address</u>	Type of Action
MGR	Bradley D. Atkins	15061 63rd Place North Loxahatchee FL, 33470	∃ Add
			Remove
	Convin Managardi		Change
MGR	Darwin Mangandi 		Add
		Beach FL 33470	□ Remove
			☐ Change
			□ Add
		·	□ Remove
			Change
			Remove
			Change
			Add
			☐ Remove
			Change
		 	🗖 Add
			Remove
			Change

Effective date, if other than the date of filing:		
Effective date, if other than the date of filing: [optional] Fan 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 Mote: [If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be abcument's effective date on the Department of State's records. The record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the ear		
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	l) ig.) Pursuant to 605.0207 te will not be listed as t	ock does not meet the applicable statutory filing requirements, this date
	. on the earlier of	
ated March 30 2019.		2019
-Audrent		

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Typed or printed name of signee

Filing Fee: \$25.00