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Name Change

COVER LETTER

TO:	Registration Sec Division of Corp					
		SS SEDANO LLC				
SUBJE	СТ:		ited Liability Company			
		amendment and fee(s) are subsidence concerning this matter				
		NIMESH B PATEL				
			Name of Person			
		IV WIRELESS SEDANO	LLC			
			Firm/Company			
		1100 N JOHN YOUNG PA	ARKWAY			
			Address			
		KISSIMMEE FL 34741				
			City/State and Zip Code			
		IVWIRELESS@LIVE.COM	M		20	:
		E-mail address: (to be used for future annual report noti	lication)		• , •
For furt	her information co	ncerning this matter, please ca	all:		۔ ر اب	77. 7.78
NIMES	SH B PATEL		407 766-7474 at ()		:21 14.3	31.15 31.15
	Name of	Person		e Telephone Number	2: 08	STATE
Enclose	d is a check for the	e following amount:				รัก
■ \$25	i.00 Filing Fec	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee Certificate of \$1a Certified Copy (additional copy is e	atus &	
	Mailing Address	<u>:</u>	Street Address:			

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

TO:

Registration Section
Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

mpany as it now appears on our records.) ited Liability Company)	 -
pany were filed on SEPTEMBER 19,2019	and assigned
liability company here:	
Liability Company," the designation "LLC" or the ab	breviation "L.L.C."
<u> </u>	
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fice address on our records, <u>enter the nam</u>	
Enter Florida street address	
, Florida	Zio Code
	Liability Company," the designation "LLC" or the ab

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 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
			□Remove
			Change
			□Add
			□Remove
			□ Change
			□Add
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ffecti	re date, if other than the date of filing:
<u>lote:</u>	clive 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 if the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as nt's effective date on the Department of State's records.
record Lis fil	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 d.
	ANUARY 16 2020
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ated .	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\

Typed or printed name of signee