## L20 0000 27304

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2020 SEP IL AM 9: 2 SECRETARY OF STAT

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## **COVER LETTER**

TO: Registration 5 Division of Co			
TGR GEN	NERAL SERVICES LLC	•	
SUBJECT:	Name of Lin	nited Liability Company	•
The enclosed Articles of	of Amendment and fee(s) are sub	omitted for filing.	
Please return all corresp	oondence concerning this matter	to the following:	
	ANA CLARA PIMENTA		
		Name of Person	·····
	ACP BUSINESS CONSU	LTING LLC	
		Firm/Company	<del></del>
	777 BRICKELL AVE SU	ITE 500	
		Address	
	MIAMI, FL 33131		
	-	City/State and Zip Code	<del></del>
	MYBUSINESSCONSULT	-	
		to be used for future annual report notif	lication)
For further information	concerning this matter, please c	all:	
ANA CLARA PIMEN	ΤΛ	305 588-2758 at ( )	
Name	of Person	Area Code Daytime	e 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 Addre Registration Division of P.O. Box 63 Tallahassee,	Section Corporations 27	Street Address: Registration Sec Division of Corp The Centre of T 2415 N. Monroo Tallahassee, FL	porations allahassee e Street, Suite 810

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

TGR GENERAL SERVICES LLC

2020 SEP 14 AM 9: 21

(Name of the Limited Liability Compa (A Florida Limited	any as it now appears on o Liability Company)	SECRETARY OF STATE TALLAHASSES, FL
The Articles of Organization for this Limited Liability Company	were filed on $\frac{01/21/20}{1}$	20 and assigned
Florida document number L20000027304		
'his amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	oility company here:	
MIAMI IBIZA WIRELESS LLC		
he new name must be distinguishable and contain the words "Limited Liabi	ility Company," the designat	ion "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	1735 SW 11TH ST	
Principal office address MUST BE A STREET ADDRESS)	MIAMI, FL 33135	
inter new mailing address, if applicable:	1735 SW 11TH ST	
Mailing address MAY BE A POST OFFICE BOX)	MIAMI, FL 33135	
3. If amending the registered agent and/or registered office :	address on our record	s, enter the name of the new region
gent and/or the new registered office address here:		
Name of New Registered Agent:		
		· · · · · · · · · · · · · · · · · · ·
New Registered Office Address:	Enter Florida stre	vet uddress
	Dinoi I Ivi lite Mi	
	City	, Florida Ziv 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 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
AMBR	TAYNARA REZENDE	1735 SW 11TH ST	
		MIAMI. FL 33135	
			Change
AMBR	LUCAS DE PAIVA RIBEIRO	1735 SW 11TH ST	□Add
		MIAMI, FL 33135	□Remove
			☐ Change
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	e date, if other tha	an the date of fili	ng:		(optional	)
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