Division of Corporations

9/8/21, 12:45 PM

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

: (850)617-6383 Fax Number

From:

Account Name : CONTADORSUNNYISLES.COM INC

Account Number : I20200000118 : (305)260-6968 Phone Fax Number : (786)513-7810

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

Email	Address:	
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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN RMC WIRELESS LLC

Certificate of Status	0
Certified Copy	. 0
Page Count	04
Estimated Charge	\$25.00

Electronic Filing Menu

Corporate Filing Menu

Help

(((H21000333593 3)))

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

RMC WIRELESS LLC		
(<u>Name of the Limited</u>) (A	Jability Company as it now appears on our reco Florida Limited Liability Company)	rds.)
The Articles of Organization for this Limited Liab		and assigned
Florida document number L21000374012		دع
This amendment is submitted to amend the following		M SET
A. If amending name, enter the new name of th	e limited liability company here:	
The new name must be distinguishable and contain the word	s "Limited Liability Company," the designation "L	LC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable	le:	5, 09
(Principal office address MUST BE A STREET	ADDRESS)	<u> </u>
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	<u></u>	
B. If amending the registered agent and/or registered agent and/or the new registered offic	registered office address on our reco e address here:	rds, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street ada	iress
		P12.1 -
	City	Florida Zip Code
		-

New Registered Agent's Signature, if changing Registered Agent:

Page: 3 of 5

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

17865137810

(((H2:000333593 3)))

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

To: +18506176383

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
AMBR	DANIELLY MARQUES DE CASTRO VIANA	18780 NE 18TH AVE #124	
		MIAMI, FL 33179	Remove
			☐ Change
			Add
			□ Remove
			Change
			Remove
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			Change
			O Add
			☐ Remove
			Change
			Remove
			Change

18506176383	Page: 5 of 5	2021-09-08 16:48:17 GMT	17865137810	From: Palo
D. If amen	ding any other information, ent	((H21000333593 3)) er change(s) here: <i>(Attach addition</i>	nal sheets, if necessary.)	
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E. Effectiv	e date, if other than the date of	filing:	(optional)	5 605.0207 (3 gb)
Note: 1	f the date inserted in this block does	not meet the applicable statutory filing	grequirements, this date will not be	listed as the
docume	nt's effective date on the Departmen	n of State's records.		
If the reco	ord specifies a delayed effect 90th day after the record is f	ive date, but not an effective t	ime, at 12:01 a.m. on the ea	arlier of:
(b) The	John day after the record is r			
Dated	SEPTEMBER 06	2021		
rzated -		. 2021		
	Rose Moran	and a member or authorized representative		
	Signature	e of a member or authorized representative	of a member	
	RENAN MARQUE	ES DE CASTRO	•	
	TOWN WITH COL	Typed or printed name of signee		_

From: Paloma Duarte