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2023 JAN 23 AM II: 4.0 Secretary de stati

COVER LETTER

TO:	Registration Se Division of Cor		
SUBJE		WIRELESS LLC	
SOBJE	CI:	Name of Lim	ited Liability Company
The one	locad Acticlas of	Amendment and fee(s) are sub	mitted for filing
			•
ricase r	eturn an correspo	ndence concerning this matter	to the following:
		PAM MCKINNEY	
			Name of Person
		PAM MCKINNEY CPA	
			Firm/Company
		3433 E GULF TO LAKE F	IWY
			Address
		INVERNESS, FL 34453	
			City/State and Zip Code
		PAM@PAMELAMCKINN	EYCPA.COM to be used for future annual report notification)
Eve firet	har information o	oncerning this matter, please co	·
		oncerning this matter, prease ex	
PAM M	ICKINNEY		352 584-1498 at ()
	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 & □ \$60.00 Filing Fee, Certified Copy (additional copy is enclosed) □ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Addres Registration S Division of C P.O. Box 632 Tallahassee, I	Section Torporations 7	Street Address: 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

ANTHEM WIRELESS LLC

(Name of the Limited Liability Compa (A Florida Limited L	ny as it now appears on our record- liability Company)	<u>s.</u>)		
The Articles of Organization for this Limited Liability Company	were filed on 09-15-2021		and assigned	
Florida document number £21000409345				
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liab	ility company here:			
ANTHEM FLAGS & SIGNS LLC				
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "LLC"	or the abbrevi	iation "L.L.C."	
Enter new principal offices address, if applicable:	<u> </u>			
(Principal office address MUST BE A STREET ADDRESS)		ूर च्या	202	
			3 J	
		2251	2	
Control of the Contro		577 877	<u>ن</u>	
Enter new mailing address, if applicable:		- 89		
Mailing address MAY BE A POST OFFICE BOX)		<u> </u>	= 0	
		<u>'\'\'</u>		
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here: Name of New Registered Agent:	nddress on our records, <u>enter</u>	the name of	the new registe	
Mane of their registered rigeti.	 			
New Registered Office Address:	Enter Florida street addres.			
	Emer Fioriau Street daaress			
	, Flo	orida	Zip Code	
	,	2	лр Соце	
New Registered Agent's Signature, if changing Registered Agent:				
I hereby accept the appointment as registered agent and agrowisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as pleing filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my duties, ar provided for in Chapter 605,	id I am fami F.S. Or, if th	iliar with and his document is	

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
			□Add
			□Change
			🗆 Add
			□Remove
			□Add
			□Remove
			□Change
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			☐ Change

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Effective date, if other than the defan effective date is listed, the date must be be a listed. If the date inserted in this blood document's effective date on the Department.	be specific and cannot be priock does not meet the appli-	r to date of filing or more cable statutory filing re	(optional) than 90 days after filing.) Pu equirements, this date wil	arsuant to 605,0207 (Il not be listed as t
e record specifies a delayed effective ed is filed.	date, but not an effective (time, at 12:01 a.m. on t	he earlier of: (b) The 9	Oth day after the
	2023			
JANUARY 18 Dated				
JANUARY 18 Dated		·		
DatedS	ignature of a member or and	Nized representative of	i member	

Filing Fee: \$25.00