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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone : (307)200-2803 Fax Number : (855)330-1010

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

Email Address:

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN **K2 WIRELESS SERVICES, LLC**

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

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ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION **OF**

K2 WIRELESS SERVICES, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

·	,	
The Articles of Organization for this Limited Liability Company Florida document number <u>L21000509814</u>	were filed on 11/30/21	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "LLC" or the abbr-	eviation "L.L.C."
Enter new principal offices address, if applicable:	2018 Lewis Turner Blvd.	
(Principal office address MUST BE A STREET ADDRESS)	Suite-C,.	
Trincipal office data ess stost be A STREET ADDRESSY	Fort Walton Beach, Florida,	32547
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		22
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	address on our records, enter the name	of the new registered
Name of New Registered Agent:		_
New Registered Office Address:	:- Enter Florida street address	<u> </u>
	, Florida	
	City	Zip 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>	Address	Type of Action
			□Add
			□Remove
			Change
			☐ Add
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Effective date, if other than the lift an effective date is listed, the date in Note: If the date inserted in this document's effective date on the	ausi be specific and cannot be prior to dat block does not meet the applicable s	e of filing or more than 90 days aff	tional) er filing.) Pursuant to 605.0207 (3 his date will not be listed as th
e record specifies a delayed effect and is filed.	ive date, but not an effective time, a	at 12:01 a.m. on the earlier of:	(b) The 90th day after the
Dated 01/28	, 2022		
() org	Signature of a member or authorized	representative of a member	
Morgan No			
iviorgan ivo	Typed or printed nat	me of signee	

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