## L22000428205

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phon	e #)
PICK-UP	MAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificate:	s of Status
Special Instructions to	Filing Officer:	
	J. HORN	E
	OCT 18 2	2022
		,

Office Use Only



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## **COVER LETTER**

TO:

Registration Section

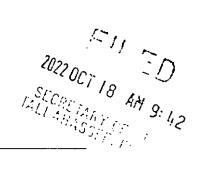
Tallahassee, Fl. 32314

Div	ision of Cor	porations			
· · · · · · · · · · · · · · · · · · ·	G.I.G BRO	ADBAND LLC			
SUBJECT:		Name of Limi	ited Liability Company		
The enclosed	d Articles of	Amendment and fee(s) are sub-	mitted for filing.		
Please return	all correspo	ndence concerning this matter	to the following:		
		Rosalinda Serrano Rodrigu	ez.		
			Name of Person		·
			Firm/Company		
		642 105th ave N			
			Address		
		Naples Florida 34108			
		info.gigbroadband@gmail.c	City/State and Zip Code		
			to be used for future annual	report notifies	ation)
For further i	nformation c	oncerning this matter, please ca	all:		
Rosalinda S	errano Rodri	guez	239 32	47795	
	Name o	f Person	Area Code	Daytime T	elephone Number
Enclosed is	a check for th	ne following amount:			
□ \$25,00 )	Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	S55,00 Filing Fee Certified Copy tadditional copy is end		☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	iling Addres		Street A	ddress: ation Secti	ion
Di	vision of C	'orporations	Divisio	n of Corpo	orations
P.0	O. Box 632	27	The Ce	ntre of Tal	lahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



G.I.G BROADBAND 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 Compa	ny were filed on Octob	er 04, 2022	and assigned
Florida document number L22000428205			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited li	ability company here	:	
The new name must be distinguishable and contain the words "Limited Lie	ability Company," the desig	gnation "LLC" or the al	obreviation "L.L.C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)			
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)		- · · - · -	
			-
	ce address on our reco		
New Registered Office Address:	Enter Florida	street address	
		Elowida	
	City	, Fioriua	Zip Code
New Registered Agent's Signature, if changing Registered Age	nt:		
I hereby accept the appointment as registered agent and a provisions of all statutes relative to the proper and comple accept the obligations of my position as registered agent of being filed to merely reflect a change in the registered off company has been notified in writing of this change.	ete performance of my as provided for in Cha	v duties, and I am apter 605, F.S. Or,	familiar with and if this document is
<u>iro</u>	hanging Registered Agent	I, Signature of New Re	gistered 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
MGR	Rosa Rodriguez De Serrano	642 105th ave N Naples Florida 34108	■Add
			□Remove
			□Change
			🗆 Add
		· · · · ·	□Remove
			Change
			[]Add
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(If an eff Note:	ive date, if other than the date of filing:
e recor	rd 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 led.
Dated	October 17 2022
	Signature of a member or authorized representative of a member

Filing Fee: \$25.00