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COVER LETTER

Registration Section

P.O. Box 6327

Tallahassee, FL 32314

TO:

Division of Co	orporations			
	WIRELESS LLC			
SUBJECT:	Name of Lin	ited Liability Company		
The enclosed Articles of	of Amendment and fee(s) are sub	mitted for filing.		
Please return all corresp	oondence concerning this matter	to the following:		
	ESSAM KERAS			
		Name of Person		
	MK BOOKKEEPING SE	RVICES, LLC		
		Firm/Company		
	6741 LAND O LAKES B	_VD		
		Address		
	LAND O LAKES, FL 346	38		~ 3 5
		City/State and Zip Code		2023 001
	ESSAM@MKBKSERVIC			<u> </u>
For further information	E-mail address: (concerning this matter, please c	to be used for future annual report notificat	tion)	-2
	concerning this matter, please e			PM I2: 40
ESSAM KERAS		813 368 - 2872 at ()] :2: [
Name	of Person	Area Code Daytime Te	lephone Number	• <i>•</i>
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)	S60.00 Filing Fee, Certificate of Stat Certified Copy (additional copy is end	
Mailing Addre Registration Division of		Street Address: Registration Section Division of Corpor		

Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

CARLOS WIRELESS LLC		
(<u>Name of the Limited Liability</u> (A Florida	y Company as it now appears on our re Limited Liability Company)	cords_)
The Articles of Organization for this Limited Liability Co	ompany were filed on 01/11/2023	and assigned
Florida document number L23000025184		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limit	ted liability company here:	
The new name must be distinguishable and contain the words "Limit	ted Liability Company," the designation "	LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	_ _	
Principal office address MUST BE A STREET ADDR	ESS)	
		17/3 2023
		17/6 ich 18/1 0 /6 ich
Enter new mailing address, if applicable:		97
Mailing address MAY BE A POST OFFICE BOX)		7
		E 96
B. If amending the registered agent and/or registered agent and/or the new registered office address here:	office address on our records, en	ter the name of the new registere
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street ad	dress
		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 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
AMBR	MINA GIRGIS	3161 SKINNER DR	
		ANTIOCH, TN 37013	■Remove
			□Change
AMBR	RAMY GERGES	927 LAVERGNE LN	□Add
	LAVERGNE, TN 37013	■Remove	
			[]Change
			□Add
			□Remove
		□Change DIV	
			□Add
			□Add
		□Remove	
		Change	
			□Add
			□Remove
			Change.

J. 11 E.	nending any other information, enter change(s) here: (Attach additional sheets, if necessary.)		
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(If an e <u>Note</u>	tive date, if other than the date of filing: 10/01/2023 (optional) ffective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be ment's effective date on the Department of State's records.	605.02 listed	!07 (3)(1 as the
the rece	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day a filed.	ıfter tl	ne
Dated	i 10/02/2023		
	NAGY AZIZ		
	Signature of a member or authorized representative of a member	-	
	NAGY AZIZ		

Filing Fee: \$25.00