

L23000073575

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

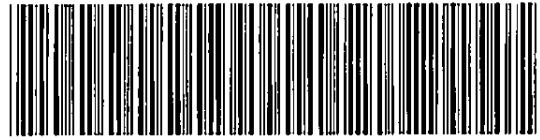
(Business Entity Name)

(Document Number)

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03/10/23--01009--020 **60.00

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TALLAHASSEE STATE
SECRETARY

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Apex Network Solutions LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Nicholas A. Estey
Name of Person

Apex Network Solutions LLC
Firm/Company

1139 NE 24th St Ocala FL, 34470
Address

Ocala / FL 34470
City/State and Zip Code

Nicholasestey@yahoo.com
E-mail address: (to be used for future annual report notification)

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TALLAHASSEE STATE
CORPORATION

For further information concerning this matter, please call:

Nicholas Estey at (352) 843-8276
Name of Person Area Code Daytime Telephone Number

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)
- \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

Mailing Address:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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

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

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STATE
OFFICE OF THE CLERK
TALLAHASSEE, FL

The Articles of Organization for this Limited Liability Company were filed on 02/09/2023 and assigned
Florida document number L23000073575

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

N/A

The new name must be distinguishable and contain the words "Limited 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 ADDRESS)

12660 SE 47th Ave Belleview, FL
34420

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

12660 SE 47th Ave Belleview, FL
34420

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

Jeremy Sheffield

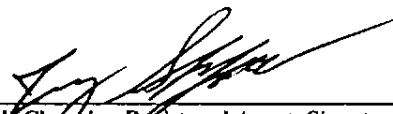
New Registered Office Address:

12660 SE 47th Ave Belleview, FL 34420
Enter Florida street address

Belleview, Florida 34420
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.


Jeremy Sheffield
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>	<u>Address</u>	<u>Type of Action</u>
<u>P</u>	<u>Nicholas Estey</u>	<u>1139 NE 24th ST Ocala</u>	<input type="checkbox"/> Add
		<u>FL, 34470</u>	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
<u>VP</u>	<u>Nathan Cribbs Jr</u>	<u>19022 E Hwy 40 Silver</u>	<input checked="" type="checkbox"/> Add
		<u>Springs FL 34488</u>	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
<u>CEO</u>	<u>Jeremy Sheffield</u>	<u>12660 SE 47th Ave</u>	<input checked="" type="checkbox"/> Add
		<u>Belleview, FL 34420</u>	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
<u>CFO</u>	<u>Adam Connell</u>	<u>16801 SE 130th Ave</u>	<input checked="" type="checkbox"/> Add
		<u>Weirsdale, FL 32195</u>	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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 TALLAHASSEE, FL
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Multiple horizontal lines for amending information.

E. Effective date, if other than the date of filing: ~~02/08/2023~~^{N/AE} (optional)

(If an effective 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 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record 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 record is filed.

Dated 03/03/2023

Signature of a member or authorized representative of a member

Typed or printed name of signee

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