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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : SHEHADEH GIANNAMORE PLLC

Account Number : I20220000096

Phone : (305)507-9845 Fax Number : (305)507-9844

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



### LLC AMND/RESTATE/CORRECT OR M/MG RESIGN CLIQ COMMUNICATIONS LLC

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TO:

## From: Jimeka Romero : Fax: 13055079843 10 (690) 417-5555 DocuSign Envelope ID: 3C280D16-0EC4-4BF0-837B-F9F802FF6872 COVER LETTER

	stration Sect sion of Corpo				
		MUNICATIONS LLC			
SUBJECT:	Name of Limited Liability Company				<del></del>
The enclosed	Articles of A	mendment and fee(s) are sub	mitted for filing.		
Please return	all correspond	dence concerning this matter	to the following:		
	Erick Trelles, Esq.				
Name of Person					
		Shehadeh Giannamore PL			
Firm/Company					<del></del>
		620 S. Le Jeune Road  Address  Coral Gables, FL 33134			
		jimena@sglawfl.com	City/State and Zip Code		····
For further in	formation con	E-mail address: () icerning this matter, please co	to be used for future annual all:	report notification)	
Erick Trelles				31 6074	
	Name of I	erson		Daytime Teleph	one Number
Enclosed is a	check for the	following amount:			
■ \$25.00 Fi	ling Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee Certified Copy (additional copy is end		\$60.00 Filing Fee. Certificate of Status & Certified Copy tudditional copy is enclosed)
	ing Address: istration Sc	ction	Street A	ddress:	

Registration Section Division of Corporations

P.O. Box 6327 Tallahassee, FL 32314

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

# DocuSign Envelope ID: 3C280D16-0EC4-4BF0-837B-F9FB02FF6872 ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

CLIQ COMMUNICATIONS LLC			
(Name of the Limi	ted Liability Compa (A Florida Limited	iny as it now appears on our Liability Company)	records.)
he Articles of Organization for this Limited L lorida document number <u>L23000443946</u>		were filed on 09/25/2023	and assigned
his amendment is submitted to amend the foll			
. If amending name, enter the new name of	~	oility company here:	
ne new name must be distinguishable and contain the	vords "Limited Liabi	lity Company," the designation	n "LLC" or the abbreviation ஜித்L.C."
Enter new principal offices address, if applicable:		620 S. Le Jeune Road	_
(Principal office address MUST BE A STREET ADD		Coral Gables, FL 33134	
			,
nter new mailing address, if applicable:		620 S. Le Jeune Road	ب
(Mailing address MAY BE A POST OFFICE BOX)		Coral Gables, FL 33134	 고 
THING HAMPESS MITT DE AT COST WITTEE	<u>100.14</u>		· · · · · · · · · · · · · · · · · · ·
. If amending the registered agent and/or i gent and/or the new registered office addre		address on our records.	enter the name of the new reg
Name of Neur Begintaged Assets	SHEHADEH C	HANNAMORE, PLLC	
Name of New Registered Agent:		GANNAMORE, PLLC	
Name of New Registered Agent:  New Registered Office Address:	SHEHADEH C	e Road	
			aidress Florida <sup>33134</sup>

### 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.

Erick Trilles

53455735502261

If Changing Registered Agent, Signature of New Registered Agent

From: Jimeria Romero 🕛

Fax 13055079843

To. (850) 617-6383

Fax: (850) 617-6383

Page: 5 of 6

10/15/2023 12:59 PM

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H amending Authorized rersonts) 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>	Name	Address	Type of Action
			□Add
			□Remove
			□Change
			🗆 Add
		M-1	□Remove
			□Change
			□Add
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Effective date, if other than the If an effective date is listed, the date mus Note: If the date inserted in this bidocument's effective date on the D	it be specific and cannot be prior to date of ock does not meet the applicable stati	(optional)  f filing or more than 90 days after filing.) Pursuant to 605.020 utory filing requirements, this date will not be listed a
ne record specifies a delayed effective ord is filed.	e date, but not an effective time, at 12	2:01 a.m. on the earlier of: (b) The 90th day after the
October 16	2023	
Dated	··	
Dated		