

LI8000033303

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(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

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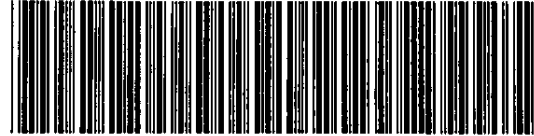
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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TALLAHASSEE, FLORIDA

S. WARREN

MAR 16 2018

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** CONNECTED2U, 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:

DANNY GILBERTO SANCHEZ MEDINA

Name of Person

Firm/Company

20238 SW 324TH ST

Address

HOMESTEAD, FL, 33030

City/State and Zip Code

familia.tomasini@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

DANNY GILBERTO SANCHEZ MEDINA

786-208-6934

Name of Person

at ( )  
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/COURIER ADDRESS:**  
Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

CONNECTED2U, 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 were filed on 02/06/2018 and assigned Florida document number L18000033303.

This amendment is submitted to amend the following:

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

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:

20238 SW 324TH ST

**(Principal office address MUST BE A STREET ADDRESS)**

HOMESTEAD, FL 33030

Enter new mailing address, if applicable:

20238 SW 324TH ST

**(Mailing address MAY BE A POST OFFICE BOX)**

HOMESTEAD, FL 33030

**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: DANNY SANCHEZ GILBERTO MEDINA

New Registered Office Address: 20238 SW 324TH ST

*Enter Florida street address*

HOMESTEAD, Florida 33030

*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

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FLORIDA

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>
MGR	HOWELL KASHIWA, HELLEN	20238 SW 324 ST	<input type="checkbox"/> Add
		HOMESTEAD, FL 33030	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	NAVARRO DE TOMASII, MARIA G	CALLE NURIA QUITA LOS CHINITOS	<input type="checkbox"/> Add
		PRADOS DEL ESTE CARACAS, VZ 1080	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	TOMASINI NAVARRO, GABRIELA	CALLE NURIA QUINTA LOS CHINITOS	<input type="checkbox"/> Add
		PRADOS DEL ESTE CARACAS, VZ 1080	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	TOMASINI HERNANDEZ, ROBERTO E	CALLE NURIA QUINTA LOS CHINITOS	<input type="checkbox"/> Add
		PRADOS DEL ESTE CARACAS, VZ 1080	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	NAVARRO DE TOMASINI, MARIA G.	CALLE NURIA QUINTA LOS CHINITOS	<input checked="" type="checkbox"/> Add
		PRADOS DEL ESTE CARACAS, VENEZUELA 1080	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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

Amendments effective as of today, March 13, 2018:

- 1) Corrected Principal Office.
- 2) Corrected Mailing address.
- 3) New Registered Agent.
- 4) Removal of all Managers.
- 5) NAVARRO DE TOMASINI, MARIA G. is added as the only owner.

**E. Effective date, if other than the date of filing: \_\_\_\_\_ (optional)**

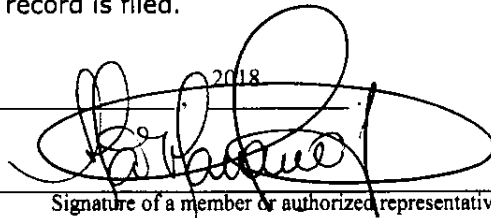
(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

**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 Tuesday, March 13th

2018  


Signature of a member or authorized representative of a member

NAVARRO DE TOMASINI, MARIA G.

Typed or printed name of signee

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