

M2000000 L11

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____

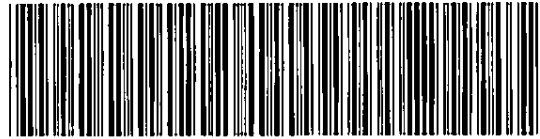
Certificates of Status _____

Special Instructions to Filing Officer:

J. HORNE

MAR - 3 2025

Office Use Only



100445365881

02/26/25--01001--002 **60.00

RECEIVED

2025 FEB 25 PM 12:49

FILED

2025 MAR -3

AM 9:31



FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 26, 2025

DEBORAH FANICH
201 E LAS OLAS BLVD
STE 1500
FORT LAUDERDALE, FL 33301 US

SUBJECT: BREEZE CONNECTED, LLC
Ref. Number: M20000006111

We have received your document and check(s) totaling \$60.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

A certificate or a document of similar import evidencing the amendment must be submitted with the application. The certificate should be authenticated as of a date not more than 90 days prior to delivery of the application to the Department of State by the Secretary of State or other official having custody of the records in the jurisdiction under the laws of which it is incorporated, formed, or organized. A translation of the certificate, under oath or affirmation of the translator, must be attached to a certificate which is not in English.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Jasmine N Horne
Regulatory Specialist II

Letter Number: 425A00004231

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: BREEZE CONNECTED, LLC
Name of Foreign Limited Liability Company

Dear Sir or Madam:

The enclosed application, certificate and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Deborah Fanich

Name of Person

Berger Singerman LLP

Firm/Company

201 E Las Olas Blvd Ste 1500

Address

Fort Lauderdale FL 33301

City/State and Zip Code

lauren@breezehome.com

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

For further information concerning this matter, please call:

Deborah Fanich

at (954) 712-5164

Name of Person

Area Code & Daytime Telephone Number

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

Enclosed is a check for the following amount:

- ☐ \$25 Filing Fee ☐ \$30 Filing Fee & Certificate of Status ☐ \$55 Filing Fee & Certified Copy ☒ \$60 Filing Fee, Certificate of Status & Certified Copy

**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE
AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT
BUSINESS IN FLORIDA**

SECTION I (1-4 must be completed)

1. Name of limited liability Company as it appears on the records of the Florida Department of
State: BREEZE CONNECTED, LLC

Enter new principal office 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)

2. The Florida document number of this limited liability company is: M20000006111

3. Jurisdiction of its organization: DELAWARE

4. Date authorized to do business in Florida: JULY 13, 2020

SECTION II (5-9 complete only the applicable changes)

5. New name of the limited liability company: KAI CONNECTED, LLC
(must contain "Limited Liability Company," "L.L.C." or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must contain "Limited Liability Company," "L.L.C." or "LLC.")

6. If amending the registered agent and/or registered officer 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: _____

New Registered Office Address: _____

Enter Florida Street Address

_____. **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

7. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:

8. If the amendment changes person, title or capacity in accordance with 605.0902 (1)(e), indicate that change:

<u>Title/ Capacity</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
Managing Director	Lori Dann	2161 East County Road 540A #225	☐ Add
		Lakeland, FL 33813	☒ Remove
			☐ Add
			☐ Remove
			☐ Add
			☐ Remove
			☐ Add
			☐ Remove
			☐ Add
			☐ Remove

9. Attached is a certificate, if required: no more than 90 days old, evidencing the
aforementioned amendment(s), duly authenticated by the official having custody of records in the
jurisdiction under the law of which this entity is organized.

/s/ Geoffrey Lottenberg

Signature of the authorized representative

Geoffrey Lottenberg

Typed or printed name of signee

Filing Fee: \$25.00

Delaware

The First State

Page 1

I, CHARUNI PATIBANDA-SANCHEZ, SECRETARY OF STATE OF THE
STATE OF DELAWARE, DO HEREBY CERTIFY THE ATTACHED IS A TRUE AND
CORRECT COPY OF THE CERTIFICATE OF AMENDMENT OF "BREEZE
CONNECTED, LLC", CHANGING ITS NAME FROM "BREEZE CONNECTED, LLC"
TO "KAI CONNECTED, LLC", FILED IN THIS OFFICE ON THE TWENTY-
FIRST DAY OF FEBRUARY, A.D. 2025, AT 1:36 O`CLOCK P.M.



C. P. Sanchez

Charuni Patibanda-Sanchez, Secretary of State

3214181 8100
SR# 20250657896

You may verify this certificate online at corp.delaware.gov/authver.shtml

Authentication: 202998286
Date: 02-22-25

State of Delaware
Secretary of State
Division of Corporations
Delivered 01:36 PM 02/21/2025
FILED 01:36 PM 02/21/2025
SR 20250657896 - File Number 3214181

**STATE OF DELAWARE
CERTIFICATE OF AMENDMENT OF
CERTIFICATE OF FORMATION
OF
BREEZE CONNECTED, LLC**

The undersigned authorized person, desiring to amend the limited liability company formation pursuant to Section 18-202 of the Limited Liability Company Act of the State of Delaware, hereby certifies as follows:

First: The name of the limited liability company is BREEZE CONNECTED, LLC.

Second: The Certificate of Formation of the limited liability company is hereby amended as follows:

The name of the limited liability company is KAI CONNECTED, LLC.

In Witness Whereof, the undersigned has executed this Certificate of Formation this 21st day of February 2025.

/s/ Geoffrey Lottenberg
Geoffrey Lottenberg, Authorized Person