**Note: Please print this page and use it as a cover sheet.** Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : ICONNECT SOLUTIONS CORP

Account Number : I20190000122 Phone : (407)863-0096 Fax Number : (407)612-2181

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

Email Address: emerson@iconnectsc.com

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN ORB COMMUNICATION USA LLC

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APR 29 2020

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## **COVER LETTER**

TO:	Registration Se Division of Cor		H20000123649 3 🕫 💛
		MUNICATION USA LLC	2
SUBJE	CT:	Name of	f Limited Liability Company
The en	closed Articles of	Amendment and fee(s) are	e submitted for filing.
Please	return all correspo	endence concerning this ma	atter to the following:
		EMERSON CORREA	A.
			Name of Person
		ICONNECT SOLUTION	ONS CORP
			Firm/Company
		6735 CONROY ROA	D STE 219
			Address
		ORLANDO, FL 3283	5
		<del>, 2, 1 , 1                             </del>	City/State and Zip Code
		EMERSON@	
		E-mail addr	ress: (to be used for future annual report notification)
For fur	ther information c	oncerning this matter, plea	ase call:
EMER	SON CORREA		407 8630096 at ()
	Name o	f Person	at () Area Code Daytime Telephone Number
Enclos	ed is a check for the	he following amount:	
≘ \$2	5.00 Filing Fee	S30.00 Filing Fee & Certificate of State	
	MailingAddres Registration	Section	StreetAddress: Registration Section
	Division of C P.O. Box 632		Division of Corporations The Centre of Tallahassee
	Tallahassee.		2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT H20000123649 3 TO 13 ARTICLES OF ORGANIZATION OF 2020 AFR 28 ABL

2020 AFR 28 AHII: 05

ORB COMMUNICATION USA LI	LC Y	- , ,
(Name of the Limit	ed Liability Company as it now appears on our records.) (A Florida Limited Liability Company)	l_
The Articles of Organization for this Limited Li Florida document number L20000077535	iability Company were filed on 03/10/2020	and assigned
This amendment is submitted to amend the follo	owing:	
A. If amending name, enter the new name of	f the limited liability company here:	
The new name must be distinguishable and contain the wo	ords "Limited Liability Company," the designation "LLC" or the	ne abbreviation "L.L.C."
Enter new principal offices address, if applica	able:	
(Principal office address MUST BE A STREE	TADDRESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	<u>BOX)</u>	· · · · · · · · · · · · · · · · · · ·
	egistered office address on our records, enter the i	name of the new register
B. If amending the registered agent and/or re agent and/or the new registered office addres	ss here:	
	ss here:	
agent and/or the new registered office addres	ss here:  Enter Florida street address	
agent and/or the new registered office addres  Name of New 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:

H200001236493

MGR = Manager AMBR = Authorized Member 2020 APR 28 AHH: 05

<u>Title</u>	Name	Address	Type of Action
AMBR	TIELLE A DRYSDALE	2000 S RAINBOW STE 108	□ Add
		LAS VEGAS, NV 89146-2827	□Remove
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			□Remove
			(☐ Change
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Effective date, if other than the date of fan effective date is listed, the date must be speci- Note: If the date inserted in this block does document's effective date on the Department.	s not meet the applicable state	(opt filing or more than 90 days after utory filing requirements, th	ional) r filing.) Pursuant to 605.0207 is date will not be listed as
e record specifies a delayed effective date, b rd is filed.	out not an effective time, at 12	2:01 a.m. on the earlier of: (	b) The 90th day after the
Dated APRIL 23	2020		
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	TIELLE A DRYSDA	LE	
	Typed or printed name of	of signec	