oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered. SIGNATURE: TODD SMITH MANAGER

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under

Electronic Signature of Signing Authorized Person(s) Detail

DOCUMENT# L07000068297

Entity Name: CULTURAL CONNECTIONS, LLC

Current Principal Place of Business:

3933 WHITE HERON DR ORLANDO ORLANDO, FL 32808

Current Mailing Address:

3933 WHITE HERON DR ORLANDO, FL 32808 US

FEI Number: 26-0508320

Name and Address of Current Registered Agent:

SMITH, TODD 3933 WHITE HERON DR ORLANDO ORLANDO, FL 32808 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Authorized Person(s) Detail :

Title	MGRM	Title	MGRM
Name	SMITH, TODD	Name	MOORE, JIMMY
Address	3933 WHITE HERON DR	Address	7501 MONTGOMERY BLVD NE SUITE
City-State-Zip:	ORLANDO FL 32808		#1203
		City-State-Zip:	ALBUQUERQUE NM 87109

Mar 27, 2014 Secretary of State CC6153453916

FILED

Certificate of Status Desired: No

03/27/2014

Date

Date

2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT