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 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. 04/24/2019

SIGNATURE: NANCY ROMANO

Electronic Signature of Signing Authorized Person(s) Detail

1005 LAKE AVENUE

LAKE WORTH. FL 33460

Current Mailing Address:

DOCUMENT# L12000047979

1005 LAKE AVENUE LAKE WORTH. FL 33460 US

FEI Number: 46-2649957

Name and Address of Current Registered Agent:

ROMANO, NANCY L 1005 LAKE AVENUE LAKE WORTH, FL 33460 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: NANCY L ROMANO

Electronic Signature of Registered Agent

Authorized Person(s) Detail :

Title	MGR
Name	ROMANO, NANCY L
Address	1005 LAKE AVENUE
City-State-Zip:	LAKE WORTH FL 33460

Entity Name: CONNECTIONOLOGY SEMINARS OF AMERICA, LLC.

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

Current Principal Place of Business:

Apr 24, 2019 Secretary of State 3283680924CC

FILED

Certificate of Status Desired: No

04/24/2019 Date

Date

MANAGER