

L07000051042

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

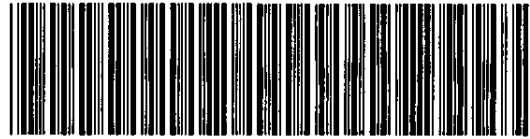
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



400262365924

07/17/14--01007--016 **30.00

14 JUL 17 PM 1:29

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Konecta International, 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:

For: Ignacio Iriarte

Name of Person

Konecta International, LLC

Firm/Company

c/o 324 Southeast 21st Avenue

Address

Cape Coral, Florida 33990

City/State and Zip Code

irriarte@yahoo.com

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

For further information concerning this matter, please call:

For: Ignacio Iriarte

at (239) 898-4459

Name of Person

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**

Konecta International, 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 May 14, 2007 and assigned
Florida document number L07000051042.

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 end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices 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)

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:

Ignacio Iriarte

New Registered Office Address:

324 SE 21st Ave.

Enter Florida street address

Cape Coral

, Florida

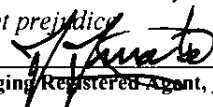
33990

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.

without prejudice
By:  *authorized representative*
If Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member 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	MAKI, ELIZABETH	431 SE 20th CT	☐ Add
		CAPE CORAL, FL 33990	☒ Remove
MBR	MONTEVERDE, MELCHOR	431 SE 20th CT	☐ Add
		CAPE CORAL, FL 33990	☒ Remove
			☐ Add
			☐ Remove
			☐ Add
			☐ Remove
			☐ Add
			☐ Remove
			☐ Add
			☐ Remove
			☐ Add
			☐ Remove

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

Please REMOVE the following MGR: MAKI, ELIZABETH - 431 SE 20TH CT, CAPE CORAL, FL 33990

Please remove the following MBR: MONTEVERDE, MELCHOR - 431 SE 20TH CT, CAPE CORAL, FL 33990

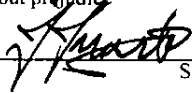
E. Effective date, if other than the date of filing: _____ (optional)

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated July 14, 2014.

without prejudice

By:



Authorized Representative

Signature of a member or authorized representative of a member

By: Ignacio Iriarte, Managing Member

Typed or printed name of signee

14 JUL 17 PM 1:29