

L10000041520

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

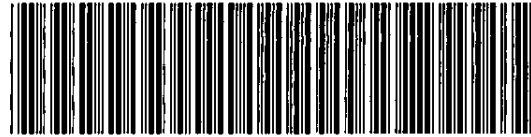
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

T. HAMPTON

DEC -7 2011

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Paynet Connect, 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:

Chris Fanelli
Name of Person

eNet Connect, LLC
Firm/Company

1050 E. Sahara Ave. #401
Address

Las Vegas, NV 89104
City/State and Zip Code

Chris@enetnv.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Chris Fanelli at (702) 308-7711
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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Page 1 of 2

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Julian Nelson	7950 NW 53 rd St. #215 Miami, FL 33166	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGR	Chris Fanelli	7950 NW 53 rd St. #215 Miami, FL 33166	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

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

Dated November 29th 2011

Signature of a member or authorized representative of a member
Julian Nelson

Typed or printed name of signee

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA