L100000461/2

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SEGRETARY OF STATE

J. BRYAN

JUN - 2 2010

EXAMINER

COVER LETTER

TO: ·'Registrati Division o	on Section f Corporations			
SUBJECT:	Connect	tions Events LLC		
	Name of Lin	nited Liability Company		
The enclosed Articl	es of Amendment and fee(s) are su	abmitted for filing.		
Please return all cor	respondence concerning this matte	er to the following:		
		lan McCluskey		
		Name of Person		
	C	Connections Events LLC		
	Firm/Company			
	2090	20900 NE 30th Ave., Suite 210		
		Address	- PH 3	
		Aventura, FL 33180	JUN -1 PH 3: 5	
		City/State and Zip Code	En co	
		ht-leadership-international. (to be used for future annual report notion		
For further information	tion concerning this matter, please	•	e de la composition della comp	
	lan McCluskey	at (305)	299-3699	
N	ame of Person	Area Code & Daytin	e Telephone Number	
Enclosed is a check	for the following amount:			
\$25.00 Filing Fo	ce \$\sum_\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed	\$60,00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
R D P	egistration Section ivision of Corporations O. Box 6327 allahassee, FL 32314	STREET/COUR Registration Section Division of Corpo Clifton Building 2661 Executive Co Tallahassee, FL 32	on rations enter Circle	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Connections Events LLC (Name of the Limited Liability Company as It now appears on our records.)
(A Florida Limited Liability Company) 4/29/2010 The Articles of Organization for this Limited Liability Company were filed on ____ L10000046112 Florida document number 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: New Registered Office Address: Enter Florida street address _, Florida ___

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 608, 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.

City

If Changing Registered Agent, Signature of New Registered Agent

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

<u>Title</u>	Name	Address	Type of Action
Mr.	Ken Roberts	20900 NE 30TH AVE AVENTURA FL 33180	Add Remove
Ms.	Gladys Mezrahi	20900 NE 30TH AVE AVENTURA FL 33180	Add Remove
MGR	Indigo Events Corporation	20900 NE 30TH AVE AVENTURA FL 33180	✓ Add Remove
Mr.	lan McCluskey	20900 NE 30TH AVE AVENTURA FL 33180	☐ Add ☑ Remove
MUR Though	Thought Leadership Interna ht Leadership International L	10831 SW 78 AVE MIAMI, FL 33156	
	International L		
	ding any other information outer share	cos boxes (Attach additional shorts if necess	Add Remove
	ding any other information, enter chang	ge(s) here: (Attach additional sheets, if necess	Remove
	ding any other information, enter chang	ge(s) here: (Attach additional sheets, if necess	Remove
	May 29 , 20	D10 To a authorized representative of a member	Remove

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Filing Fee: \$25.00