

L10000078165

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

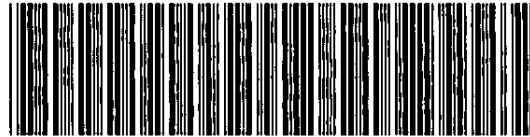
(Business Entity Name)

(Document Number)

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13 OCT 25 AM 10:44
STATE OF FLORIDA
TALLAHASSEE, FLORIDA

2

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: **Florida Network Solutions 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:

Sandro Sierra

Name of Person

Florida Network Solutions LLC

Firm/Company

20737 Great Laurel Avenue

Address

Tampa, FL 33647

City/State and Zip Code

sandro.sierra@fnetworksolutions.com

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

For further information concerning this matter, please call:

Sandro Sierra

Name of Person

at **813 758-1696**

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

RECEIVED
TALLAHASSEE, FL
13 OCT 25 AM 10:41
DIVISION OF CORPORATIONS

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

Florida Network Solutions 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 July 26-10 and assigned
Florida document number L10000078165.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

Valor Connection, LLC

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)

13	NOV	25	2010
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Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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13	NOV	25	2010

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 _____

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 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.

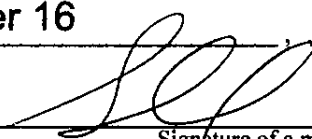
If Changing Registered Agent, Signature of New Registered Agent

MGR = Manager
MGRM = Managing Member

13 OCT 75
Add
Remove
JAN 44

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

Dated October 16 2013



Signature of a member or authorized representative of a member

Sandro Sierra, President

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

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19 OCT 25 AM 10:44
SUNNY BEACH, FLORIDA