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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

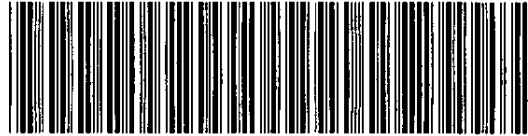
(Business Entity Name)

(Document Number)

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2015 AUG 10 AM 8:05
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2015 AUG 12 12:05

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: CONNECTING AS ONE, 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:

Felipe Munoz

Name of Person

Brokers Title Group, LLC

Firm/Company

20900 NE 30th Ave Suite 807,

Address

Aventura, FL 33180

City/State and Zip Code

fmunoz@brokerstitles.com

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

For further information concerning this matter, please call:

Felipe Munoz

786
at ()

239 9236

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**

FILED
2015 AUG 10 AM 8:05
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CONNECTING AS ONE, 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 08/02/2010 and assigned
Florida document number L10000080448.

This amendment is submitted to amend the following:

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

TESSY INVESTMENTS, LLC

The new name must be distinguishable and contain 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)

3787 SARATOGA LANE

DAVIE FL, 33328

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

3787 SARATOGA LANE

DAVIE FL, 33328

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 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.

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person 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>
MGMR	CARDONA, BEATRIZ E	21200 NE 38TH Ave, Suite 2504	<input type="checkbox"/> Add
		Aventura, Fl, 33180	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGMR	PAUL TESSY	3787 SARATOGA LANE	<input checked="" type="checkbox"/> Add
		DAVIE FL, 33328	<input type="checkbox"/> Remove
		3787 SARATOGA LANE	<input type="checkbox"/> Change
MGMR	LEITH TESSY	DAVIE FL, 33328	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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2015 AUG 10 AM 8:05
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TALLAHASSEE, FLORIDA

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated AUGUST 06 2015

Signature of a member or authorized representative of a member

FELIPE MUNOZ

Typed or printed name of signee