

L10 000 106191

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

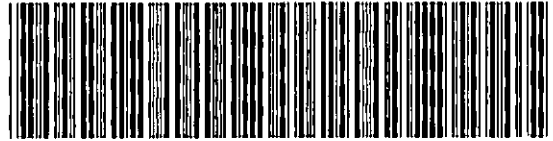
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

6/25/21
TM

Office Use Only



200366438052

05/24/21--01033--003 **30.00

21 MAY 24 PM 3:01

COVER LETTER

TO: **Registration Section**
Division of Corporations

SUBJECT: **KONNECT RF, LLC**

Name of Limited Liability Company

The enclosed Articles of Amendment and fees are submitted for filing.

Please return all correspondence concerning this matter to the following:

Jared Blake Namm, Esq.

Name of Person

Berman Law Group

Firm/Company

3351 NW Boca Raton Blvd

Address

Boca Raton, FL 33431

City, State and Zip Code

jnamm@thebermanlawgroup.com

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

For further information concerning this matter, please call:

Jared Blake Namm, Esq.

561

820-5200 ext 223

at (_____) _____

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 Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

KONNECT RE, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

21 MAY 24 PM 3: 02

The Articles of Organization for this Limited Liability Company were filed on 10/11/2010 and assigned
Florida document number L10000106191.

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 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)

11921 Fox Hill Circle

Boynton Beach, Florida 33473

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

11921 Fox Hill Circle

Boynton Beach, Florida 33473

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:

JARED BLAKE NAMM, ESQ.

New Registered Office Address:

3351 NW BOCA RATON BLVD

Enter Florida street address

BOCA RATON

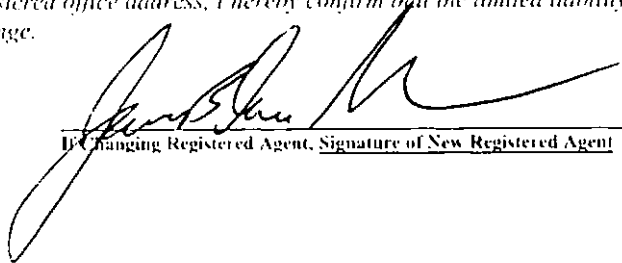
City

Florida 33431

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.


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>
Owner	CLYDE W REA III	605 SE 1ST AVENUE SUITE H	<input checked="" type="checkbox"/> Add
		DELRAY BEACH, FL 33444-3580 US	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	SHAUN MISKELLY	11921 Fox Hill Circle	<input checked="" type="checkbox"/> Add
		Boynton Beach, Florida 33473	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	JEFFREY R. BECKER	11933 Fox Hill Circle	<input checked="" type="checkbox"/> Add
		Boynton Beach, Florida 33473	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	MICHAEL DANNUNZIO	5636 Muirfield Village Circle	<input checked="" type="checkbox"/> Add
		Lake Worth, Florida 33463	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	KONNECT RE, INC.	11921 Fox Hill Circle	<input type="checkbox"/> Add
		Boynton Beach, Florida 33473	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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

21 MAY 24 PM 3:02

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

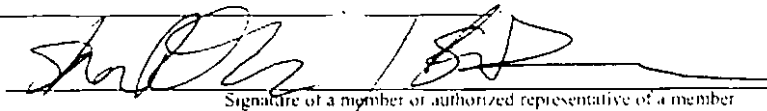
(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

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.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated MAY 20

2021



Signature of a member or authorized representative of a member

Shaun Miskelly / Komet RF, Inc

Typed or printed name of signee

Filing Fee: \$25.00