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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: FLORIDA CONNEXION PROPERTIES 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:

ROSANA ALMEIDA

Name of Person

FLORIDA CONNEXION PROPERTIES LLC

Firm/Company

8113 BREEZE COVE LANE

Address

Orlando, Florida 32819

City/State and Zip Code

rosanaalmeida@yahoo.com

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

For further information concerning this matter, please call:

ROSANA ALMEIDA

Name of Person

at (**407**)

4685600

Area Code & Daytime Telephone Number

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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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

FLORIDA CONNEXION PROPERTIES LLC

(A Florida Limited Liability Company)

This amendment is submitted to amend the following:

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>
MGRM	Wilson Lima	582 Brantley Terrace Way # 303, Altam	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGRM	Rosana Almeida		<input type="checkbox"/> Add <input checked="" 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.)

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TALLAHASSEE FLORIDA

Dated November 8th, 2011

Jose Wilson Lima

Signature of a member or authorized representative of a member

Jose Wilson Lima

Typed or printed name of signee