L18000172130

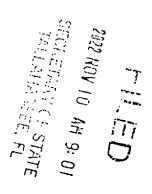
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PICK-UP	WAIT	MAIL
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Certified Copies	Certificates	of Status
Special Instructions to Fil	ling Officer:	·

Office Use Only



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COVER LETTER

TO: Registration Section

Division of Cor	porations	•		
	NECTIONIT, LLC			
SUBJECT:	Name of Lin	nited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please return all correspo	ondence concerning this matter	to the following:		
	Andres Plaza			
		Name of Person		
		Firm/Company		
	1766 Sea Lark Lane, Suite	· 8		
		Address		
	Navarre, Florida 32566			
		City/State and Zip Code	.	
	aplaza@oneconnectionit.co	m to be used for future annual report noti	G	
Day familian in formation of	n-mail address: (oncerning this matter, please c	·	neation)	
	oncerning this matter, please c			
Andres Plaza		850 462-4073 at ()		
Name o	l Person	Area Code Daytim	e Telephone Number	
Enclosed is a check for th	ne 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 Addres Registration 5		Street Address: Registration Se	ction	
Division of C	•	Division of Cor		
 P.O. Box 6327 Tallahassee, FL 32314 		The Centre of Tallahassee 2415 N. Monroe Street, Suite 810		

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B. If amending the registered agent and/or agent and/or the new registered office address: Name of New Registered Agent: New Registered Office Address:	registered office address on outess here: Andres Plaza 1766 Sea Lark Lane, Suite 8	r records, <u>enter the name</u> Florida street address Florida 3256	0 AH 9: 01
(Mailing address MAY BE A POST OFFICE B. If amending the registered agent and/or agent and/or the new registered office address Name of New Registered Agent:	registered office address on outess here: Andres Plaza 1766 Sea Lark Lane, Suite 8		of the new registo
(Mailing address MAY BE A POST OFFICE B. If amending the registered agent and/or agent and/or the new registered office address Name of New Registered Agent:	registered office address on outess here: Andres Plaza	r records, <u>enter the name</u>	of the new registo
(Mailing address MAY BE A POST OFFICE B. If amending the registered agent and/or agent and/or the new registered office addr	registered office address on ou ess here:	r records, enter the name	of the new registo
(Mailing address MAY BE A POST OFFICE B. If amending the registered agent and/or	registered office address on ou	r records, <u>enter the name</u>	of the new registe
(Mailing address MAY BE A POST OFFICE B. If amending the registered agent and/or	registered office address on ou	r records, enter the name	VON NOW
(Mailing address MAY BE A POST OFFICE	-		VON NOW
	<u> </u>		#0 %
	<u> </u>		
Enter new mailing address, if applicable:			
(Frincipal office address MOST DE A STRE			
(Principal office address MUST BE A STRE			
Enter new principal offices address, if appli	ien bler		
The new name must be distinguishable and contain the	words "Limited Liability Company," t	he designation "LLC" or the abbr	reviation "L.L.C."
A. If amending name, enter the new name	of the limited liability company	<u>here:</u>	
This amendment is submitted to amend the fol	llowing:		
Florida document number L18000172130	·		
		7/17/2018	and assigned
The Articles of Organization for this Limited 1			
(Name of the Lim The Articles of Organization for this Limited)	nited Liability Company as it now ap (A Florida Limited Liability Compar		

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 Yew 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>	Address	Type of Action
AMBR	Carlos Vives	1766 Sea Lark Lane, Suite D	□Add
		Navarre, FL 32566	■Remove
			☐Change
AMBR Claudia Bant	Claudia Bant	1766 Sea Lark Lane, Suite D	
	Navarre, FL 32566	■Remove	
			Change
AMBR Dalaia Plaza	Dalaia Plaza	1766 Sea Lark Lane, Suite D	□Add
		Navarre, FL 32566	■Remove
			□Change
AMBR Wayne Hunter, Jr.	Wayne Hunter, Jr.	1766 Sea Lark Lane, Suite 8	■Add
		Navarre, FL 32566	□Remove
			□Change
	<u></u>		□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change

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Note: If the d	late inserted i	han the date of date must be spec n this block does on the Departme	not meet	the applical	date of filin ble statutor	ig or more tha y filing requ	(option 90 days after irements, this	onal) filing.) Pursuant date will not	t to 605.0207 (3 be listed as th
e record specil rd is filed.	ñes a delayed	effective date, b	ut not an e	effective tin	e, at 12:01	a.m. on the	earlier of: (b) The 90th da	ay after the
Dated	<u>Vov</u>	7	2	1022 -	-· >				
<u></u>				<u> </u>					
		Signatur	e of afficm	ber or author	zed represe	ntative of a m	embe r		
An	dres Plaza	/	′ (

Filing Fee: \$25.00

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	City	Zip Code
	Navarre	Florida 32566
New Registered Office Address:	1766 Sea Lark Lane, Suite Enter	8 ter Florida street address
rame or then the grown on the m.	1744 C. I. Johnson Spires	
Name of New Registered Agent:	Andres Plaza	
agent and/or the new registered office addr	ess here:	
B. If amending the registered agent and/or	registered office address on	our records, enter the name of the new register
Mailing address MAY BE A POST OFFICE	<u></u>	
Enter new mailing address, if applicable:		
Principal office address in OST DE ASTRE		
Principal office address MUST BE A STRE		
Enter new principal offices address, if appli		
he new name must be distinguishable and contain the	words "Limited Liability Company,"	"the designation "LLC" or the abbreviation "L.L.C."
A. If amending name, <u>enter the new name o</u>		
This amendment is submitted to amend the fol		
Florida document number L18000172130	·	
The Articles of Organization for this Limited I		on ////2018 and assigned
(Name of the Limi	ted Liability Company as it now a (A Florida Limited Liability Comp	ppears on our records.) any)
ONECONNECTIONIT, LLC		

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.

f 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

Title	<u>Name</u>	<u>Address</u>	Type of Action
AMBR	Carlos Vives	1766 Sea Lark Lane, Suite D	□Add
		Navarre, FL 32566	Remove
			Change
AMBR	Claudia Bant	1766 Sea Lark Lane, Suite D	
		Navarre, FL 32566	Remove
			□Change
AMBR	Dalaía Plaza	1766 Sea Lark Lane, Suite D	□Add
	Navarre, FL 32566	= Remove	
			☐Change
AMBR	AMBR Wayne Hunter, Jr.	1766 Sea Lark Lane, Suite 8	■Add
		Navarre, FI, 32566	Remove
			□ Change
			□Add
		<u></u>	□Remove
		Change	
			□Add
			□Remove
			□Change

D. If am-	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
•	
•	
·	
Note:	(optional) Tective date, if other than the date of filing:
If the reco record is f	rd 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 filed.
Dated	<u>10007</u> . <u>2022</u> .
	Signature of a member or authorized representative of a member
	Andres Plaza
	Typed or printed name of signee

Filing Fee: \$25.00