

11/15/22, 1:57 PM

Division of Corporations

Florida Department of State

Division of Corporations

Electronic Filing Cover Sheet

L19000031409

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SECRETARY OF STATE
TALLAHASSEE, FL

To: Division of Corporations
Fax Number : (850)617-6383

From: Account Name : ICONNECT SOLUTIONS CORP
Account Number : I20190000122
Phone : (407)863-0096
Fax Number : (407)612-2181

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
BM BUSINESS & INVESTMENTS LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

C. BRUMBLEY
NOV 17 2022

COVER LETTER

TO: Registration Section
Division of Corporations

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SUBJECT: BM BUSINESS & INVESTMENTS 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:

EMERSON CORREA
Name of Person

ICONNECT SOLUTIONS CORP
Firm/Company

6735 CONROY ROAD STE 309
Address

ORLANDO, FL 32835
City/State and Zip Code

CONTACT@ICONNECTSC.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

EMERSON CORREA
Name of Person

407
Area Code

8630096
Daytime Telephone Number

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

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BM BUSINESS & INVESTMENTS 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 01/30/2019Florida document number 1.19000031409

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:

7850 KENWAY PLACE WEST(Principal office address MUST BE A STREET ADDRESS)BOCA RATON, FL 33433

Enter new mailing address, if applicable:

7850 KENWAY PLACE WEST(Mailing address MAY BE A POST OFFICE BOX)BOCA RATON, FL 33433B. 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:ICONNECT SOLUTIONS CORPNew Registered Office Address:6735 CONROY ROAD STE 309

Enter Florida street address

ORLANDO

City

Florida32835

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.

EMERSON CORREA
If Changing Registered Agent, Signature of New Registered Agent

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TALLAHASSEE, FL

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

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AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
AMBR	INFINITY ADMINISTRACAO LTDA	RUA FRANCISCO SA, 47 VARZEA	<input checked="" type="checkbox"/> Add
		TERESOPOLIS, RJ, 25953011, BRASIL	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
AMBR	BRUNO C QUATTRONE MAZZEI	EST DAS CACATUAS 547 PQ DO IMBUI	<input type="checkbox"/> Add
		TERESOPOLIS, RJ 25970-001 BR	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
AMBR	MAELI F. P. QUATTRONE MAZZEI	EST DAS CACATUAS 547 PQ DO IMBUI	<input type="checkbox"/> Add
		TERESOPOLIS, RJ 25970-001 BR	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input 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.)

CHANGING TITLE TO AMBR OF BRUNO AND MAELI

Typed or printed name of signee