

L190000039316

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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05/04/20--01022--021 **60.00

2020 MAY -4 AM 8:31

CA
5/8/20

TO: Registration Section
Division of Corporations

SUBJECT: The Maverick Connection 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:

Robert Nichols
Name of Person

The Maverick Connection
Firm/Company

2-1732 little bear way
Address

Boca, Raton FL 33428
City/State and Zip Code

robert@themaverickconnection.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Robert Nichols at (561) 662-5328
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

TO
ARTICLES OF ORGANIZATION
OF

The Maverick Connection LLC

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

2020 MAY -4 AM 8:31
DIVISION OF CORPORATIONS

The Articles of Organization for this Limited Liability Company were filed on 2/08/2019 and assigned

Florida document number L19000039316.

This amendment is submitted to amend the following:

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

N/A

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)

21732 little bear way
Boca Raton FL 33428

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

21732 little bear way
Boca Raton FL 33428

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

or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of A</u>
<u>AMBR</u>	<u>Hole, Evan</u>	<u>1218 SUSSEX ST</u>	<input type="checkbox"/> Add
		<u>Boynton Beach, FL, 33436</u>	<input checked="" type="checkbox"/> Remove
		_____	<input type="checkbox"/> Change
<u>AMBR</u>	<u>Andrade, Juliana</u>	<u>2425 NE 33rd ST</u>	<input type="checkbox"/> Add
		<u>Oakland Park, FL, 33309</u>	<input checked="" type="checkbox"/> Remove
		_____	<input type="checkbox"/> Change
<u>AMBR</u>	<u>Pace, Benjamin</u>	<u>2425 NE 33rd ST</u>	<input type="checkbox"/> Add
		<u>Oakland Park FL 33309</u>	<input checked="" 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

