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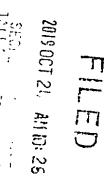
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COVER LETTER

TO;		stration Secsion of Corp		,	€ ⊌	
SUBJE	cr.	Subterra Co	nnections LLC			
SUBJE.						
The enc	losed	Articles of a	Amendment and fee(s) are sub	mitted for filing.		
Please r	eturn	all correspor	ndence concerning this matter	to the following:		
			Adriana Tasende Mengual		•	
			<u> </u>	Name of Person		
			Subterra Connections LLC			
Firm/Company						
5459 Old Winter Garden						
Address						
	Orlando FL 32811				' .	
				City/State and Zip Code	<u> </u>	
atasende@subterraconnections.com						
			E-mail address: (to be used for future annual report r	notification)	
For furt	her in	formation co	oncerning this matter, please ca	all:		
Adriana Tasende Mengual				321 310-2659		
		Name of	Person		time Telephone Number	
Enclosed is a check for the following amount:					i,	
■ \$25	.00 Fi	ling 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			ntion Section n of Corporations ox 6327	STREET/COU Registration Sec Division of Cor Clifton Building 2661 Executive	porations <u>-</u>	

Tallahassee, FL 32301

ARTICLES OF AMENDMENT: TO ARTICLES OF ORGANIZATION OF

Subterra Connections 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 $\frac{02/14/2019}{1}$ and assigned Florida document number <u>L19000045905</u> 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." 5459 Old Winter Garden Rd Enter new principal offices address, if applicable: Orlando FL 32811 (Principal office address MUST BE A STREET ADDRESS) 5459 Old Winter Garden Rd Enter new mailing address, if applicable: Orlando FL 32811 (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name ofregistered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address

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

Florida

Zip Code

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>	Type of Action
AMBR	Adriana Tasende Mengual	5459 Old Winter Garden Rd	□ Add
		Orlando FL 32811	
			□ Remove
			☐ Change
AMBR	Leydy Y Londono Patino	5459 Old Winter Garden Rd	□ vai
		Orlando FL 32811	
		Orianuo Pt. 32611	Remove
		-	■ Change
AMBR	Mauricio Conte Baccan	5459 Old Winter Garden Rd	
		- 	
		Orlando FL 32811	☐ Remove
			☐ Change
		,1	Add
		·.	Pemove
		•	Change
			□ Remove
		.:	Change
		- <u> </u>	
			□ Remove
			Change

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Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00