

LA 0000 91341

WAT

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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MAIL

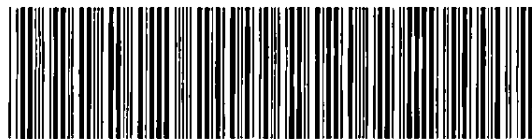
(Business Entity Name)

(Document Number)

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06/03/24--01010--023 **25.00

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2024 JUN -3 AM 3:57

SEATTLE STATE
COURT

COVER LETTER

TO: **Registration Section
Division of Corporations**

SUBJECT: TEAM CONNECT 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:

LARRY GRANT WEISS

Name of Person

TEAM CONNECT LLC

Firm Company

7010 LAKE NONA BLVD. APT 269

Address

LAKE NONA, FLORIDA 32827

City/State and Zip Code

Lord Lynne118@gmail.com

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

For further information concerning this matter, please call:

LARRY GRANT WEISS

407 630-278-5202
at ()

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

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

TEAM CONNECT 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 04/02/19 and assigned Florida document number L19000091341.

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 office address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

7010 LAKE NONA BLVD

APT 269

LAKE NONA, FLORIDA 32827

Enter new mailing address, if applicable:

(Mailing address MAYBE A POST OFFICE BOX)

7010 LAKE NONA BLVD

APT 269

LAKE NONA, FLORIDA 32827

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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:

LARRY GRANT WEISS

New Registered Office Address:

7010 LAKE NONA BLVD APT 269

Enter Florida street address

LAKE NONA

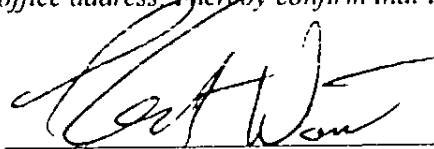
City

32827

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

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>	<u>Type of Action</u>
MGR	LORILYN WEISS	7010 LAKE NONA BLVD	<input type="checkbox"/> Add
		APT 269	<input checked="" type="checkbox"/> Remove
		LAKE NONA FLORIDA 32827	<input type="checkbox"/> Change
MGR	LARRY GRANT WEISS	7010 LAKE NONA BLVD	<input checked="" type="checkbox"/> Add
		APT 269	<input type="checkbox"/> Remove
		LAKE NONA FLORIDA 32827	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b).

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record 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 record is filed.

Signature of member or authorized representative

Signature of a member or authorized representative of a member:

LARRY GRANT
WEISS

Typed or printed name of signee