## LZO 000 125761

(Re	equestor's Name)	
(Ac	ldress)	
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(Cir	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
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(Do	ocument Number)	
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JUN 2 9 2020 S. YOUNG



## **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: Bess Connections 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:	
Name of Person	
Firm/Company	
10018 Boynton Beach Circle 314	
Boynton Beach Circle 314  Boynton Beach Gl 33437  City/State and Zip Code  Leroy TBESS & Chail. Con  E-mail address/ (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Name of Person at (SG) 635 - 2441  Area Code Daytime Telephone Number	
Enclosed is a check for the following amount:	
S25.00 Filing Fee S30.00 Filing Fee SCertificate 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

2

	OF	**	
Ress Con (Name of the Limited Liab (A Flori The Articles of Organization for this Limited Liability Florida document number L2000 125	nections LLC  pility Company as it now appears of ida Limited Liability Company)  Company were filed on	1/0/- 4	and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the li	mited liability company here	5:	
The new name must be distinguishable and contain the words "L	imited Liability Company," the des	ignation "LLC" or the abbre	eviation "L.L.C."
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADI	DRESS)		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or register agent and/or the new registered office address here	red office address on our rec e:	ords, <u>enter the name (</u>	of the new registered
Name of New Registered Agent:  New Registered Office Address:	Enter Florid	oynton Rouch la street address  L. Florida	

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>	Address	Type of Action
AMBR	Leroy Bess	Boynton Beal Fl 33437	<b>₩</b> Add
	/	Boynton Beal 4 33437	Remove
			Change
			🗆 Add
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			🗆 Change

## Page 2 of 3

If am	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
lf an e Note	ctive date, if other than the date of filing:  [Seffective 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  [Seffective date in this block does not meet the applicable statutory filing requirements, this date will not be listed as ment's effective date on the Department of State's records.
he re Th	ecord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of se 90th day after the record is filed.
Date	d
	1 2
	Signature of a member or authorized representative of a member
	Typed or printed name of signee
	Typed or printed name of signer