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Division of Corporations

Fax Number : (850)617-5383

From:

Account Name : ICONNECT SOLUTIONS CORP

Account Number : 120190000122 Phone : (407)863-0096 : (407)612-2181 Fax Number

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Help

From. EMERSON CORREA

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From: EMERSON CORREA

COVER LETTER

TO: Registration Se Division of Cor			
THE STON	E FACTORY COMPANY LLC		
SUBJECT:	Name of Limited Liability Company		
The enclosed Articles of	Amendment and fee(s) are submitted for filing.		
Please return all correspo	ndence 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	7	
	City/State and Zip Code	SEC	
	CONTACT@ICONNECTSC.COM		-7
	E-mail address, (to be used for future annual report notification)	의명 (1) 건류 기	
For further information of	oncerning this matter, please call:	- 취진 - a -	,
EMERSON CORREA	at (407)863 0096	F SAN	
Name (d Person Area Code Daytime Telephone Number	5H 9	

MailingAddress: Registration Section Division of Corporations

P.O. Box 6327 Tallahassee, FL 32314 StreetAddress:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

From: EMERSON CORREA

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

H21000263705 3

THE STONE FACTORY COMPANY LLC		
(Name of the Limited Liability Cor (A Florida Limite	pany as it now appears on o d Liability Company)	ir records.)
The Articles of Organization for this Limited Liability Compa Florida document number L20000283981	ny were filed on $\frac{09/10/20}{}$	20 and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited li	ability company here:	
The new name must be distinguishable and contain the words "Limited Lie	ability Company," the designat	ion "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)	<u> </u>	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered office agent and/or the new registered office address here: Name of New Registered Agent:		
New Registered Office Address:	Enter Florida str	reet culdress
		Florida
	City	Florida
New Registered Agent's Signature, if changing Registered Age	ent:	
I hereby accept the appointment as registered agent and a provisions of all statutes relative to the proper and complaceept the obligations of my position as registered agent being filed to merely reflect a change in the registered of company has been notified in writing of this change.	ete performance of my c as provided for in Chap	tuties, and Fam Jamiitar with and ter 605, F.S. Or, if this document is
110	Thanging Registered Agent. S	ignature of New Registered Agent

To: 18506176383 Page, 4 of 5 2021-07-08 16,00:41 UTC 14076122181 From: EMERSON CORREA

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 H21000263705 3

<u>Title</u>	Name	Address	Type of Action
MGR	FELIPE RUBACK FERNANDES	6349 CASTELVEN DRIVE 102	□Add
		ORLANDO, FL 32835	<u>≘</u> Remove
MGR	DANIEL KERNER S VIEIRA	135 LAKESIDE DRIVE	≅Add
		BASTROP, TX 78602	□Remove
			Change
			□Add
			Remove
			□ Change
			□Add
			□Remove
			Change
			□Remove
			☐ Change
			\ \tag{\tau} \ \tau \ \tag{\tau} \ \tau \
			Remove
			□Change

Page: 5 of 5

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ADDING MGR DANIEL KERNER S	VIEIRA
	<u> </u>
	LA
	JA
<u> </u>	
	A Constitution
ective date, if other than the date of i	
te: If the date inserted in this block does cument's effective date on the Departmen	not meet the applicable statutory trinig requirements; this date with not so have
tunent's creenire and on the a specimen	
ecord specifies a delayed effective date, bu	t not an effective time, at 12:01 a m on the earlier of: (b). The 90th day after
s tiled	
Hed HULY 07	2021/7/
ted	

Typed or printed name of signee