Electronic Filing Cover Sheet

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(((H20000334472 3)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

: ICONNECT SOLUTIONS CORP Account Name

Account Number : I20190000122 : (407)863-0096 : (407)612-2181 Fax Number

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. \*\*

Email Address:

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN MGS BUSINESS & BUSINESS LLC

Certificate of Status	0
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Electronic Filing Menu

Corporate Filing Menu

Tallahassee, Fl. 32314

## **COVER LETTER**

TO:	Registration Solution Of Co			H20000334472 3	
		INESS & BUSINESS LLC			
SUBJE	CT:	Name of Limi	ned Liability Company	<del></del>	
The enc	dosed Articles of	Amendment and fee(s) are sub-	mitted for filing.		
		ondence concerning this matter			
		EMERSON CORREA			
			Name of Person		
		ICONNECT SOLUTIONS	CORP		
			Firm/Company	<u> </u>	
		6735 CONROY RD STE 2	219		
			Address		
		ORLANDO, FL 32835			?
			City/State and Zip Code	<del>-</del>	1
		EMERSON@ICONN E-mail address: (	NECTSC.COM to be used for future annual report	notification)	
For fur	ther information	concerning this matter, please c	all:		7:1:1:
EMER	SON CORREA		407 8630096		
	Name	of Person	at () Area Code Da	ytime Telephone Number	
linalas	ad is a check far	the following amount:			
	5.00 Filing Fee		☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee. Certificate of State Certified Copy (additional copy is enc	
	MailingAddr Registration Division of P.O. Box 63	Section Corporations			

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MGS BUSINESS & BUSINESS 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 99/16/2020 and assigned of Florida document number 1.20000291838
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 offices address, if applicable:
(Principal office address MUST BE A STREET ADDRESS)
Enter new mailing address, if applicable:
(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 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
, , , , , , , , , , , , , , , , , , ,
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

#### H20000334472 3

<u>Title</u>	Name	Address	Type of Action
MGR	ANTONIO RAFAEL JUNIOR	2260 RAPOLLO DRIVE	■Add
		KISSIMMEE, FL 34741	Remove
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record specifies a delayed effective of is filed.	iale, but not an effective time	, at 12:01 a.m. on the earlier o	f; (b) The 90th day after the
SEPTEMBER 24	2020		
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