Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : ICONNECT SOLUTIONS CORP

Account Number : I20190000122

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

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

Email Address:					
	-mail	Address:			



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

Certificate of Status	0
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Help

K. SALY SEP 1 8 2025 TO:

Registration Section

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810

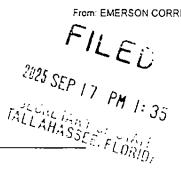
Tallahassee, FL 32303

COVER LETTER

Division of Cor	rporations		
MGS BUS	INESS & BUSINESS LLC		
SUBJECT:	Name of Lin	nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing	
		-	
r lease return an correspo	ondence concerning this matter	to the following:	
	EMERSON CORREA		
		Name of Person	
	ICONNECT SOLUTION	S CORP	
		Firm/Company	
	6735 CONROY RD, STE	309	
	•	Address	
	ORLANDO, FL 32835		
		City/State and Zip Code	
	BUSINESS@ICONNECTS		
	E-mail address: (to be used for future annual report i	notification)
For further information c	oncerning this matter, please c	ali:	
EMERSON CORREA		407 863-0096	
Name o	f Person	Area Code Day	time Telephone Number
Enclosed is a check for the	e following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addres		Street Address:	
Registration S Division of C		Registration : Division of C	
P.O. Box 632		The Centre o	= -

From: EMERSON CORREA

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 09/16/2020 _____ and assigned Florida document number L20000291838 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." 6735 CONROY RD, STE 309 Enter new principal offices address, if applicable: ORLANDO, FL 32835 (Principal office address MUST BE A STREET ADDRESS) 6735 CONROY RD, STE 309 Enter new mailing address, if applicable: ORLANDO, FL 32835 (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 _, 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.

Cin

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
MGR	ANTONIO RAFAEL JUNIOR	9906 BALLAST DR	□Add
		ORLANDO, FL 32827	□Remove
			■Change
			□Add
			□Remove
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C	THANGING THE PRINCIPAL ADDRESS
C	THANGING THE MAILING ADDRESS
(THANGING THE ADDRESS OF THE MGR ANTONIO RAFAEL JUNIOR
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Yactis	e date, if other than the date of filing: (optional)
an effo ote: l	ctive 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 605.020 f the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as nt's effective date on the Department of State's records.
ecord	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 d.
ited _	09/16/2025
	Signature of a member br authorized representative of a member

Filing Fee: \$25.00