2/3/23, 6:23 PM

Division of Corporations

Florida Department of State

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(((H23000046130 3)))



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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.

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2023

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN BUENOS FAMILY HOUSE LLC

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Help

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COVER LETTER

TO:	Registration Se Division of Cor			
	BUENOS P	FAMILY HOUSE LLC	₩	
SUBJ	ECT:	Name v	of Limited Liability Company	
The er	nclosed Articles of	Amendment and fee(s) ar	re submitted for filling.	
Please	return all correspo	ndence concerning this m	natter to the following:	
		EMERSON CORREA	A	
		·	Name of Person	
	ICONNECT SOLUTIONS CORP			
	Firm/Company			
		ICONNECT SOLUT	TONS CORP	
			Address	
		ICONNECT SOLUTI	TONS CORP	
		· · · · · · · · · · · · · · · · · · ·	City State and Zip Code	
		CONTACT@ICONNI		
		E-mail addr	ress: (to be used for future annual report notification)	
For (u	rther information co	oncerning this matter, plea	ase call:	
EMER	RSON CORREA		407 8630096 at (
	Name of	i Person	Area Code Daytime Telephone Number	

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. Mouroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

H230000461303

BUENOS FAMILY HOUSE LLC					
(Name of the Limited Liability Comp. (A Florida Limited	inv as it now appears on our records.) Liability Company)				
The Articles of Organization for this Limited Liability Company Florida document number 1.21000496430	were filed on 11/18/2021	and	l assign	cd	
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the limited liah	illity company here:				
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the	abbreviation	n"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:	7786 LINKSIDE LOOP				
(Mailing address MAY BE A POST OFFICE BOX)	REUNION, FL 34747				
-					
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, <u>enter the na</u>	me of the	new re	<u>gister</u>	
Name of New Registered Agent:	·· ·· · · · · · · · · · · · · · · · ·		7023		
New Registered Office Address:			Ę		
	Enter Florida street address , Florida	1-3-	3 - 6	F120	
	City	Zip C	oder	==	
New Registered Agent's Signature, if changing Registered Agent:		٠.	<u>:</u>		
I hereby accept the appointment as registered agent and agreenersisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as point filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my duties, and I an provided for in Chapter 605, F.S. O	r familiar r, if this a	with a locume	nd	

To: Sunbiz

2023-02-03 23:28:04 GMT

14076122181

From: EMERSON C

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

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Title	Name	Address	Type of Action
			□Add
			TRemove
			□Change
			
			□Remove
			Change
			LJAdd
			□Remove
			[TChange
			□ Add
			⊒Remove
		 	
			U∧dd
			⊒Remove
			☐ Change
<u>_</u>			□Add
			□Remove
			LJChange

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From: EMERSON C

			
			
	·		
			
			
			
			
ffective date, if other than the	late of filing:	to date of filing or more than 90 days after filing.) Pr	uemant to 605 0207 /3
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record specifies a delayed effective I is filed.	date, but not an effective ti	me, at 12:01 a.m. on the earlier of; (b) The 9	Auth day after the
ated	July Topoling Land	<u> </u>	
		SO_{A} .	
	July Topolin da a	retal Societ	

Typed or printed name of signee