L23000308321

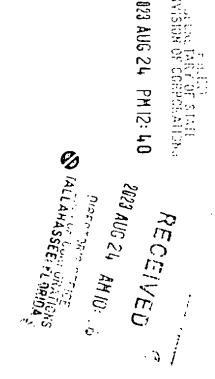
	(Requestor's Name)			
	(Address)			
	(Address)			
	(City/State/Zip/Phone #)			
PICK-UP	WAIT MAIL			
· · · · · · · · · · · · · · · · · · ·	(Business Entity Name)			
(Document Number)				
Certified Copies	Certificates of Status			
Special Instructions to Filing Officer:				

Office Use Only



600413608476

05/24/23--01001--012 **25.00



COVER LETTER

TO:

Registration Section

Division of Co	rporations			
SUBJECT: CON	nect Title	mised Liability Company		
	radio of En	mind Elability Company		
The enclosed Articles of	Amendment and fee(s) are su	bmitted for filing.		
Please return all corresp	ondence concerning this matte	r to the following:		
	-			
	Mindy	Moret Name of Person		
		Name of Person		
	Connect	Firm/Company LLC		
	M dolal	Sample Rd.	, Ste. 317	ON 6707
	Coral Sp	Orings, Fl. 330	565	2023 AU6 24 PM 12: 40
	Mnocal	City/State and Zip Code		<u></u>
	E-mail address:	to be used for fiture annual report notif	ecation)	
For further information of	oncerning this matter, please o		ucanou)	Ċ
Δ	- I	ali.		
Ir lindy 1	moret	1971 344	-4472	
Nanle o	f Person	Area Code Daytime	Telephone Number	
Enclosed is a check for the	ne following amount:			
\$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
Mailing Addres		Street Address:		
Registration S Division of C		Registration Sec	tion	
P.O. Box 632	7	Division of Corporations The Centre of Tallahassee		
Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810		

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

lonnect Title 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 7 31 23 and assigned Florida document number
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)
20 E
Enter new mailing address if applicables
Date: New Haating address, it 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 chargin Parists 14
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 **Title** <u>Name</u> **Address** Type of Action Mindy Moret AMBR Sergey Mekhtiyer □Remove Springs, H __ 🗆 Add □Remove \Box Add □Remope Change _ □Add \square Remove

_ Change

		
_		
-		
		
		20
		2023 AUS 2
 -		
		CORPORALION PH 2:
		12: 40
(If an effect Note: If	e date, if other than the date of filing:	tional) er filing.) Pursuant to 605.0207 (3)(his date will not be listed as the
f the record s ecord is filed	pecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: ((b) The 90th day after the
Dated	8/14/2023,	
	(Ma (thousand	
	Signature of a member or authorized representative of a member	

Filing Fee: \$25.00