L20000 193393

(Re	questor's Name)	
(/10	<u> </u>	
(Ado	dress)	
(* 12.		
(Add	dress)	
(, 10.	are33)	
(Cit	y/State/Zip/Phone	<u>#</u>
(OR	y/Otate/Zip/r Hone	<i>™)</i>
PICK-UP	MAIT	MAIL
(Bu	siness Entity Nam	e)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
·	·	

Office Use Only



800376567358

11,49,41 -01018--097 *=27.00

2021 NOV 19 AM 7: 38 SECRETARY DE STATE

O SHATWONE

COVER LETTER

Registration Section

TO:

Division of Cor	porations		
E&A AUT	O LLC		
SUBJECT:	Name of Lin	nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
	ondence concerning this matter		
r-lease return an correspo	andence concerning this matter	to the following.	
	ELLIS A SANCHEZ MA	FEO	
		Name of Person	
	E & A AUTO LLC		
		Firm/Company	
	1455 W LANDSTREET R	RD.STE 427	
	 	Address	
	ORLANDO, FL 32824		
		City/State and Zip Code	· · · · · · · · · · · · · · · · · · ·
	EAAUTOLLC@GMAIL.C	OM to be used for future annual report no	da' a -
		·	imegnon)
For further information c	oncerning this matter, please c	аН:	
ELLIS A SANCHEZ MA	ATEO	781 985-8397	
Name o	l'Person	at () Area Code Daytir	ne Telephone Number
Enclosed is a check for the	re following amount:		
■ \$25.00 Filing Fee	\$30.00 Filing Fee &	□ \$55.00 Filing Fee &	S60.00 Filing Fee.
= 52.500 rung rec	Certificate of Status	Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addres		Street Address:	
Registration S		Registration Se	
Division of C P.O. Box 632	•	Division of Co The Centre of	
Tallahassee, 1			oe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

FILED

2021 NOV 19 AM 7:38

SECRETARY OF STATE (Name of the Limited Liability Company as it now appears on our beoords) (A Florida Limited Liability Company)

The Articles of Organization for this Limited I	iability Company wo	ere filed on	and assigned
Florida document number	·		
This amendment is submitted to amend the fol	lowing:		
A. If amending name, enter the new name of	of the limited liabilit	v company here:	
The new name must be distinguishable and contain the	words "Limited Liability	Company," the designa	ntion "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if appli	cable:		
(Principal office address MUST BE A STREE	ET ADDRESS)		
Enter new mailing address, if applicable:	-		
(Mailing address MAY BE A POST OFFICE	<u> (BOX)</u> -		
B. If amending the registered agent and/or agent and/or the new registered office addre		dress on our record	ls, enter the name of the new registered
Name of New Registered Agent:	ELLIS A SANCH	EZ MATEO	
New Registered Office Address:	1455 W LANDST	REET RD.STE 427	
		Enter Florida st	vet address
	ORLANDO		Florida - 32824 Zip Code
		Ciţ	Zip Code
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 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	ELLIS A S MATEO	2613 DUNRAVEN CT	
		KISSIMMEE FL 34743	■Remove
MGR	ELLIS A SANCHEZ MATEO	2613 DUNRAVEN CT	Add
		KISSIMMEE FL 34743	□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			Change
			□Add
			□Remove
			□Remove
			□Change

_		
_		
_		
_		_
_		_
_		_
_		
		
		_
_		
_		_
	, - 1 .	
-		
_		_
ote:	date, if other than the date of filing:	505.0207 (isted as t
record Lis tile	pecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day al	fter the
ated 1	OVEMBER 15 2021	
_	Till IAA	

Filing Fee: \$25.00

Typed or printed name of signee