

207000049135

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

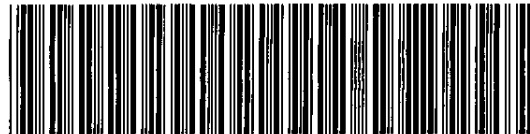
(Business Entity Name)

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 2, 2016

FLORIDA FILING & SEARCH SERVICES

SUBJECT: ESVENTURES, LLC.
Ref. Number: L07000049135

We have received your document for ESVENTURES, LLC. and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The entity must be active before the amendment can be filed.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Justin M Shivers
Regulatory Specialist III
Registration/Qualification Section

Letter Number: 916A00011534

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(File second)

Please keep original file
date.

Thanks!

FLORIDA FILING & SEARCH SERVICES, INC.

P.O. BOX 10662 TALLAHASSEE, FL 32302

155 Office Plaza Dr Ste A Tallahassee FL 32301

PHONE: (800) 435-9371; FAX: (866) 860-8395

DATE: 6/1/16

NAME: ESVENTURES, LLC

TYPE OF FILING: AMENDMENT

COST: 25.00

RETURN: PLAIN COPY PLEASE

ACCOUNT: FCA000000015

AUTHORIZATION: ABBIE/PAUL HODGE

Attach

** File second **

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Esventures, LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Lorna J. Virts

Name of Person

Smith, Gambrell & Russell, LLP

Firm/Company

1230 Peachtree Street NE, Suite 3100

Address

Atlanta, GA 30309

City/State and Zip Code

lvirts@sgrlaw.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Lorna Virts

404 815-3580
at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the 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 ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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

ESVENTURES, 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 05/09/2007 and assigned
Florida document number L07000049135.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

ESVENTURES US, LLC

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)

c/o Thomas J. Stalzer

1230 Peachtree Street NE, Suite 3100

Atlanta, GA 30309

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

c/o Thomas J. Stalzer

1230 Peachtree Street NE, Suite 3100

Atlanta, GA 30309

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:

NRAI Services, Inc.

New Registered Office Address:

1200 South Pine Island Road

Enter Florida street address

Plantation

Florida

City

33324

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 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

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	Godbless, Eruani Azibapu	741 Charing Place	<input type="checkbox"/> Add
		Deltona, FL 32725	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Azibapu, Eruani	c/o Thomas J. Stalzer	<input checked="" type="checkbox"/> Add
		1230 Peachtree St NE Ste 3100	<input type="checkbox"/> Remove
		Atlanta, GA 30309	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Business Purpose: The business purpose for which this limited liability company is organized is
any lawful activity for which limited liability companies may be formed in the state of Florida.


E. Effective date, if other than the date of filing: _____ (optional)

(If an effective 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 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record 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 record is filed.

Dated 29th May, 2016.



Signature of a member or authorized representative of a member

Eruani Azibapu, Member

Typed or printed name of signee