L11000084660

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2013 FEB -8 MM IL 21 SECRETARY OF STATE

FEB 1 1 2013 T CLINE

COVER LETTER

TO: Registration S Division of Co					
SUBJECT: EAH	, LLC				
	Name of Limi	ited Liability Company			
The enclosed Articles o	f Amendment and fee(s) are sub	omitted for filing.	·		
Please return all corresp	ondence concerning this matter	to the following:			
	Mike Hurwitz	Z			
		Name of Person	· · · · · · · · · · · · · · · · · · ·		
	EAH, LLC				
		Firm/Company			
	1133 Georg	ia Trace Ave.			
		Address			
	Valrico, FL 3				
	ssimpl96@aol.co	City/State and Zip Code Om to be used for future annual report notificat	ion)		
For further information	concerning this matter, please c	•	,	F. 2	
Mike Hurw	itz	813 ₅₂₀₋₀₉₄	6	2013 FEB SEGRETA	ر بودند،
Name	of Person	Area Code & Daytime Te	elephone Number	- 6	
Enclosed is a check for	the following amount:			F STA	F-18
\$25.00 Filing Fee	□\$30.00 Filing Fee & Certificate of Status	□\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□\$60.00 Filing Certificate of Certified Cop	Status &	d)

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

EAH, LLC			
(Name of the Limited Liability (A Florida	y Company as it now appears on our reco Limited Liability Company)	ords.)	_
The Articles of Organization for this Limited Liability (Company were filed on July 22, 2011	ar	nd assigned
Florida document number L11000084660			·
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the lim	sited liability company here:		
The new name must be distinguishable and end with the wo "L.L.C."	ords "Limited Liability Company," the design	gnation "LLC" o	r the abbreviation
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADD)	RESS)		
		<u> </u>	2
Enton now welling address if anniverble.			I3FEB
Enter new mailing address, if applicable:		- <u>89</u>	O James
(Mailing address MAY BE A POST OFFICE BOX)	-	171 -<	
B. If amending the registered agent and/or regis registered agent and/or the new registered office add		enter Th e na	me of the ne
Name of New Registered Agent:			
New Registered Office Address:	Enter Florida si	44-11	
	Enter rioriaa si	ireei aaaress	
	, Flo	orida	Code
	•	-4	

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 608, 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 the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Mana MGRM = Ma	ger naging Member		
<u>Title</u>	Name	Address	Type of Action
			Add
			Remove
			Add
			Remove
			
		<u> </u>	Add
		ATTARY O	Remove
		SAN SAN THO	& (T)
		TO STATE	Add
	****	P	
			Remove
			_
			_
			Remove
			
			Add
			 1
			Remove

Please amend "Artical III, The Purpose of Which This Limited Liability Company is Organized is			
Any and All Lawful Business			
February 05	2013		
	,		
mile Hy	court -		
Mike Hurwitz	nature of a nember or authorized representative of a member		
	Typed or printed name of signee		
	Page 3 of 3		
	Filing Fee: \$25.00		

2013 FEB -8 MM 13- 21 SEGRETARY OF STATE SALLAMASSEE, FLORIDA