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Registration Section TO: **Division of Corporations**

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Elea Holdings LLC

SUBJECT:

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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:

	Michael Kadoch		
		Name of Person	
	Kadoch Law Group		
		Firm/Company	······
	7501 NW 4th Street, Suite	204	
		Address	
	Plantation, FL 33317		
	·	City/State and Zip Code	
	michael@kadochlaw.com		-
	E-mail address: (to be used for future annual report noti	fication)
For further information c	oncerning this matter, please c	all:	ំ ភា
Michael Kadoch		954 713-9423 at ()	
Name o	f Person		e 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)
<u>Mailing Addres</u> Registration S Division of C P.O. Box 632 Tallahassee, I	Section Corporations 7	<u>Street Address:</u> Registration Se Division of Cor The Centre of T 2415 N. Monro Tallahassee, FL	porations Tallahassee c Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Elea Holdings 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 12/28/2011	and assigned
Florida document number L11000144729	

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 "LLC."

7501 NW 4th Street Enter new principal offices address, if applicable: Suite 204 3 (Principal office address MUST BE A STREET ADDRESS) در Plantation, FL 33317 14 . ال 7501 NW 4th Street Enter new mailing address, if applicable: 1 Suite 204 (Mailing address MAY BE A POST OFFICE BOX) Plantation, FL 33317

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	t uddress
		, Florida
	City	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.

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If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being addee or removed from our records:

MGR = Manager AMBR = Authorized Member

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<u>Title</u>	<u>Name</u>	Address	<u>Type of Action</u>
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

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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) <u>Note:</u> 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 May 10th	2023
	· · · ·
	The the
-	Signature of a member or authorized representative of a member

Michael Kadoch

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Typed or printed name of signee