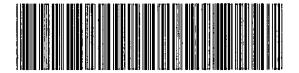
## L13000082383

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## **COVER LETTER**

TO:

Registration Section

Tallahassee, FL 32314

Div	ision of Cor	porations	,	
SUBJECT:	EBB, LLC			•
SOBJECT.		Name of Lim	ited Liability Company	
The enclosed	l Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please return	all correspo	ndence concerning this matter	to the following:	
		Beatriz E Hernandez		
			Name of Person	
		EBB, LLC		
			Firm/Company	
		7301 SW 100 Ct		
			Address	
		Miami, FL 33173		
			City/State and Zip Code	
		EBBLLCUSA@gmail.com		
		E-mail address: (	to be used for future annual report no	tification)
For further is	nformation c	oncerning this matter, please ca	ill:	
BEATRIZ F	HERNANI	DEZ	305 9273038 at ( )	
	Name o	f Person	Area Code Daytir	ne Telephone Number
Enclosed is a	i check for th	ne following amount:		
<b>■</b> \$25.00 I	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)
	iling Addres	<del></del>	Street Address: Registration Se	ection
	gistration S vision of C	Section Sorporations	Division of Co	
	). Box 632		The Centre of	Tallahassee

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

EBB, 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  $\frac{06/06/2013}{1}$ and assigned Florida document number L13000082383 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." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if 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 City

## 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, <u>enter the title, name, and address of each person\_being added</u> <u>or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Beatriz Lopez-Gross	7301 SW 100 CT	
		Miami, Fl 33173	
			□Add
		<del> </del>	□Remove
			□Change
			□Add
			□Remove
			Change
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Dated	·
Dated	February 4. 2021
	Dated

Filing Fee: \$25.00