# L13000101216

(Req	uestor's Name)	
(Add	ress)	
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PICK-UP	WAIT	MAIL
(Bus	iness Entity Nam	e)
(Doc	ument Number)	
Certified Copies	Certificates	of Status
Special Instructions to F	iling Officer:	

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# **COVER LETTER**

	sion of Corpo			
SUBJECT:	Eazy Tech Su	* =		
_			ted Liability Company	
The enclosed	Articles of Ar	nendment and fee(s) are subr	nitted for filing.	
Please return a	all correspond	ence concerning this matter t	o the following:	
		William Webster		
			Name of Person	
		Eazy Tech Support, LLC		
			Firm/Company	
		221 Hartwig Court		
			Address	
		Orlando, Flordia 32824		
			City/State and Zip Code	
		bill@wgwebster.com		
		E-mail address: (to	o be used for future annual report notif	ication)
For further inf	formation con-	cerning this matter, please ca	lli:	
William G W			at () 374-3730 Area Code Daytime	
	Name of P	erson	Area Code Daytime	Telephone Number
Enclosed is a	check for the	following amount:		
\$25.00 Fi	ling 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



16 JAN 11 AM 8: 01

Eazy Tech Support, LLC

ort, LLC

SECAL MRY OF STATE

(Name of the Limited Liability Company as it now appears on our records. ALLAHASSEE FLORIDA

(A Florida Limited Liability Company)

he Articles of Organization for this Limited Liability		and assigned
lorida document number L13000107216	·	
his amendment is submitted to amend the following:		
a. If amending name, enter the new name of the lin	nited liability company here:	
he new name must be distinguishable and contain the words "Lin	mited Liability Company," the designation "LLC" of	r the abbreviation "L.L.C."
Inter new principal offices address, if applicable:	. <del></del>	
Principal office address MUST BE A STREET ADD	RESS)	
Inter new mailing address, if applicable:	·	
Mailing address MAY BE A POST OFFICE BOX)		
3. If amending the registered agent and/or regi	istored office address on our records	ontor the name of the
egistered agent and/or the new registered office add		enter the name of the
Name of New Registered Agent:		
New Registered Office Address:		
New Registered Office Padaress.	Enter Florida street address	
	, Flori	da
	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.

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>	Name	Address	Type of Action
MGRM	Major Singh	221 Hartwig Court	Add
		Orlando, FL 32824	■ Remove
			Change
MGRM	Tamisue Webster	221 Hartwig Court	Add
		Orlando, FL 32824	■ Remove
			☐ Change
			Add
			□ Remove
			Change
			□ Add
			Remove
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ective date, if other the effective date is listed, the ter. If the date inserted in	date must be specific	and cannot be price	or to date of filing	or more than 90 days	optional) after filing.) Pursuar	nt to 605.02 he listed:
nument's effective date o	n the Department of	of State's record	ls.	g requirements	, this dute vill not	be nated t
record specifies a d he 90th day after t	elayed effective he record is file	e date, but n d.	ot an effectiv	ve time, at 12:0	01 a.m. on the	earlier
ed		2016				
		12/11	old (	1		
				<u> </u>		
	Signature o	ra member or au	horized represents	ative of a member	. <u></u>	<del></del>

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Filing Fee: \$25.00