L14000013079

| (Red | questor's Name) | |
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| PICK-UP | WAIT | MAIL |
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| Certified Copies | Certificates | s of Status |
| Special Instructions to Filing Officer: | | |
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Office Use Only

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COVER LETTER

Registration Section

Tallahassee, FL 32314

TO:

| Divi | sion of Cor | porations | | * |
|---------------------------------------|---|--|---|---|
| unis ir car | Eastern Pac | rific Holdings Company, LLC | • | |
| SUBJECT:] | | Name of Lim | ited Liability Company | |
| The enclosed | Articles of | Amendment and fee(s) are sub- | mitted for filing. | |
| Please return | all correspo | ondence concerning this matter | to the following: | |
| | | Brandon Mubarak | | |
| Name of Person | | | | |
| Eastern Pacific Holdings Company, LLC | | | | |
| Firm/Company | | | | |
| 500 Executive Center Dr Apt 5N | | | | |
| | | | Address | |
| | | West Palm Beach, FL 3340 |)1 | |
| | | | City/State and Zip Code | |
| | | easternpacific.hc@outlook.c | | |
| | | | to be used for future annual report noti | fication) |
| For further in | formation c | oncerning this matter, please co | all: | |
| Brandon Mut | barak | | 305 519 9997 at () | |
| | Name o | f Person | Area Code Daytim | e Telephone Number |
| Enclosed is a | check for the | ne following amount: | | |
| □ \$25.00 F | iling 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 |
| | ling Addres | | Street Address: | etian |
| | Registration Section Division of Corporations | | Registration Section Division of Corporations | |
| | Box 632 | - | The Centre of T | |

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| Eastern Pacific Holdings Compan | * | | | |
|---|---|---------------------------|------------|-----------------|
| (<u>Name of the Lim</u> | ited Liability Company as it now appears on our records. (A Florida Limited Liability Company) |) | | |
| The Articles of Organization for this Limited Florida document number 1.14000013079 | Liability Company were filed on January 24, 2014 | ; | and assig | med |
| This amendment is submitted to amend the fo | llowing: | | | |
| 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 abbrevia | tion "L.L. | <u>('."</u> |
| Enter new principal offices address, if appl | icable: | | | |
| (Principal office address MUST BE A STRE | ET_ADDRESS) | | | |
| Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE | | | | |
| many may ess mir DE 11 Cor Of the | | | | |
| agent and/or the new registered office addr | registered office address on our records, <u>enter thess here:</u> Brandon Mubarak | ne name of t | the new | <u>register</u> |
| Name of New Registered Agent: | | :- | | • |
| New Registered Office Address: | 1645 Palm Beach Lakes Blvd Suite 1200 Enter Florida street address | · · · | | ··· |
| | | 22.00 | : | ; ; |
| | West Palm Beach Flor | rida <u>33401)</u> Zij | . Cada | |
| N D in I A N N 16 A 1 | | . 2.4 | p Copaes | |
| New Registered Agent's Signature, if changing | Registered Agent: | • • • | <u> </u> | |

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> | Address | Type of Action |
|--------------|-------------------|--------------------------------|----------------|
| MGR | Brandon Mubarak | 500 Executive Center Dr Apt 5N | |
| | | West Palm Beach, FL 33401 | □Remove |
| | | | |
| MGR | Georgette Mubarak | 500 Executive Center Dr Apt 5N | |
| | | West Palm Beach, FL 33401 | Remove |
| | | | □Change |
| | | | □Add |
| | | | □Remove |
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| Effective date, if other than the data on effective date is listed, the date must be Note: If the date inserted in this block document's effective date on the Department. | c does not meet the applical | o date of filing or more the ble statutory filing rec | (optional) nan 90 days after filing.) Purquirements, this date will | suant to 605.0207 (not be listed as t |
| record specifies a delayed effective d | ate, but not an effective tin | ne, at 12:01 a.m. on th | ie earlier of; (b) - The 90i | th day after the |
| d is filed. | | | | |
| | 2022 | |) | |
| | | |) | |
| rd is filed. October 09 Dated | 2022 | milate | | |

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