L14000043660

(Re	questor's Name)	
(Ad	dress)	<u> </u>
(Ad	dress)	
(Cit	ty/State/Zip/Phon	e #)
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COVER LETTER

TO:	Registration Sec Division of Corp			
CHDIC	EZTS, LL	.C		
SUBJE	λι:		ited Liability Company	
The end	closed Articles of A	Amendment and fee(s) are sub	mitted for filing.	
Please	return all correspor	ndence concerning this matter	to the following:	
		Ervin Zubic		
		_	Name of Person	<u></u>
		EZTS, LLC		
			Firm/Company	
		13830 58th St. N. Si	uite 409	
			Address	
		Clearwater, FL 3376	60	
		-	City/State and Zip Code	
		ervin@bodysseyperf		
- ^			to be used for future annual report notified	ition)
For fur	ther information co	oncerning this matter, please ca	all:	
Ervin	Zubic		727 776-1076 Area Code Daytime T	
	Name of	Person	Area Code Daytime T	elephone Number
Enclose	ed is a check for th	e following amount:		
□ \$25	5.00 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)

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

(<u>Name of the Limited Liability Compa</u> (A Florida Limited I	ny as it now appears on our records.)	
(A Florida Limited I	Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number L14000043660	were filed on 3/14/2014	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and end with the words "Limited Liab	ility Company," the designation "LLC" or	the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	14280 Walsingham Rd.	CRE CRE
(Principal office address MUST BE A STREET ADDRESS)	Largo, FL 33774	AAS 2
Enter new mailing address, if applicable:	14280 Walsingham Rd.	H L: L9
(Mailing address MAY BE A POST OFFICE BOX)	Largo, FL 33774	D.71 - W
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here		nter the name of the
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Florid	a Ziv Code
N Desirational Assembly Circumstance if the series Desirational Assembly	City	zip Coae
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent and agr provisions of all statutes relative to the proper and complete		am familiar with and

If Changing Registered Agent, Signature of New Registered Agent

company has been notified in writing of this change.

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = M $AMBR = A$	lanager authorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add
			☐ Remove
			Add
			Al Comove
			EC 24 HASS
			FE. FLOR
			ORIDA Remove
			_□ Add
			Add
			□ Remove
	***		Add
			□ Remove

	
ffective date, if other than the date of filing the effective date must be specific, cannot be prior to date the date this document is filed by the Florida Departmen	te of receipt or filed date and cannot be more than 90 days after
December 23,	2014
, alcu	·
	member or authorized representative of a member
Signature of a r	member or authorized representative of a member
	Typed or printed name of signee

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SECRETARY OF STATE

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Filing Fee: \$25.00