

L16 000156894

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

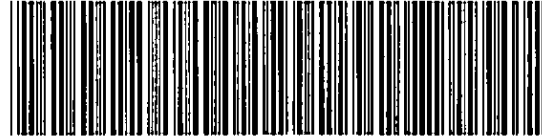
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2022 OCT 20 AM 11:34
FALL RIVER, CT



BG LAW, P.A.

999 Ponce De Leon Blvd, Suite 1105 Coral Gables, FL 33134

Office: 786-431-5779

Fax: 305-397-1920

Barbara Garcia, Esq.

Claudia Alonso, Esq.

October 14, 2022

Via Regular Mail

Registration Section

Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

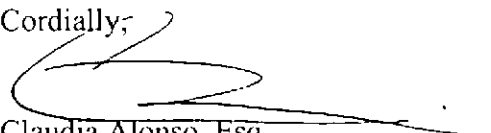
Re: E5 Holdings I, LLC
Document No.: L16000156894

To Whom It May Concern,

Enclosed please find the articles of amendment and Resignation from Manager for the above mentioned limited liability company. Attached also is check #3503 payable to the Florida Department of State for \$50.00 representing the filing fees for the above mentioned documents.

Should you need any additional information, do not hesitate to contact us.

Cordially,



Claudia Alonso, Esq.

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: E5 HOLDINGS I, LLC

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:

BARBARA GARCIA

Name of Person

BG LAW, PA

Firm/Company

999 PONCE DE LEON BLVD STE 1105

Address

CORAL GABLES FL 33134

City/State and Zip Code

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

BARBARA GARCIA

786 431-5779
at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the 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)

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

FILED

2022 OCT 20 AM 11:34

E5 HOLDINGS 1, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

LI: AHASSE-111

The Articles of Organization for this Limited Liability Company were filed on AUGUST 22, 2016 and assigned Florida document number L16000156894.

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 "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Nora Gonzalez

6001 SW 85 Ave

Miami FL 33143

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

Nora Gonzalez

6001 SW 85 Ave

Miami FL 33143

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:

NORA GONZALEZ

New Registered Office Address:

6001 SW 85th AAVE

Enter Florida street address

MIAMI

City

Florida 33143

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.

Nora Gonzalez
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>	<u>Address</u>	<u>Type of Action</u>
MGR	BARBARA GARCIA	999 PONCE DE LEON BLVD. STE 1105	<input type="checkbox"/> Add
		CORAL GABLES, FL 33134	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	NORA GONZALEZ	6001 SW 85th AAVE	<input checked="" type="checkbox"/> Add
		MIAMI, FL 33143	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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STUDY HAS BEEN

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2022 OCT 20 AM 11:34

一、二、三、四、五、六、七、八、九、十、十一、十二、十三、十四、十五、十六、十七、十八、十九、二十、二十一、二十二、二十三、二十四、二十五、二十六、二十七、二十八、二十九、三十、三十一、三十二、三十三、三十四、三十五、三十六、三十七、三十八、三十九、四十、四十一、四十二、四十三、四十四、四十五、四十六、四十七、四十八、四十九、五十、五十一、五十二、五十三、五十四、五十五、五十六、五十七、五十八、五十九、六十、六十一、六十二、六十三、六十四、六十五、六十六、六十七、六十八、六十九、七十、七十一、七十二、七十三、七十四、七十五、七十六、七十七、七十八、七十九、八十、八十一、八十二、八十三、八十四、八十五、八十六、八十七、八十八、八十九、九十、九十一、九十二、九十三、九十四、九十五、九十六、九十七、九十八、九十九、一百。

Note: 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.

Dated October 13, 2022

Signature of a member or authorized representative of a member

Nora Gonzalez

Typed or printed name of signee

Filing Fee: \$25.00