116000172847

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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JUL 16 2019 M. SOLOMON



July 5, 2019

ERROSHELL CAMPBELL P. O. BOX 100768 FORT LAUDERDALE, FL 33310

SUBJECT: E.S.C,LLC

Ref. Number: L16000172847

We have received your document for E.S.C,LLC, however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$25.00.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Tacarri K Glass Regulatory Specialist II

RECEIVED

Letter Number: 119A00013552

COVER LETTER

то:	Registration Se Division of Cor			
SUBJE	CT:	F,50	nited Liability Company	
		Name of Lin	nited Liability Company	
The enc	losed Articles of a	Amendment and fee(s) are sub	omitted for filing.	
Please re	eturn all correspoi	ndence concerning this matter	to the following:	
		Eir	SS/18/1 (4177)	Vé /
			Firm/Company	
		P.O. BO	X 100 768	
		Fort Lain	City/State and kin Code	3310
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For furth	er information co	ncerning this matter, please or		otification)
Erro	oshell (amobell	954. 593	5-9138
	Name of	Person	at (<u>954)</u> <u>59.5</u> Area Code Dayti	me Telephone Number
Enclosed	is a check for the	following amount:		
	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)
	Registrat	G ADDRESS: ion Section	STREET/COUR Registration Sect	RIER ADDRESS:

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

Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

TO ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

E.S.C LLC		
(<u>Name of the Limited Liability Compa</u> (A Florida Limited	any as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number $\frac{L/6000172847}{}$.	were filed on <u>6-6-19</u>	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	oility company here;	
The new name must be distinguishable and contain the words "Limited Liabi	hity Company," the designation "LLC" or the ab	breviation "L.L.C."
Enter new principal offices address, if applicable:	E.S.C. 11C	
(Principal office address MUST BE A STREET ADDRESS)	E.S.C. LLC 324 Now 1703 North Miami	St. Beach, Fl. 3.
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here		
Name of New Registered Agent:		<u> </u>
New Registered Office Address:	P DI A	
	Enter Florida street address Florida	PR PR III
	City	Z:p Code
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent and agre	ee to act in this capacity. I further as	ee to comply with the

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

Title	Name	Address	Type of Action
MGR	Slanelle Lambert	P.O. BOX 100768 Fortland	1/2 Add
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Page 3 of 3

Filing Fee: \$25.00