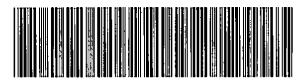
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(Re	questor's Name)
(Ad	dress)
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(Cit	ty/State/Zip/Phone #)
PICK-UP	WAIT MAIL
(Bu	siness Entity Name)
(Do	ocument Number)
Certified Copies	Certificates of Status
Special Instructions to	Filing Officer:
,	Office Use Only



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My

COVER LETTER

subject: <u>E(</u>	SPA CARPENT Name of Limi	RY LLC ted Liability Company	 _
The enclosed Articles of A	Amendment and fee(s) are subr	mitted for filing.	
Please return all correspon	ndence concerning this matter t	to the following:	
	<u>E5T.</u>	EVAO ABREU Name of Person	
	EGPA	CARPENTRY L	LC
	9350 KE	TAY CIRCLE	
	BOCA RATE	City/State and Zip Code One used for future annual terrort notion	il. Com
For further information co	oncerning this matter, please ca	all:	
ESTEVA Name of	O ABREU Person	at (<u>561</u>) <u>566</u> Area Code Daytim	2 3833 e Telephone Number
Enclosed is a check for th	c 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)

Registration Section

Division of Corporations

"TO:

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

EGPA CARP	ENTRY LLC
(<u>Name of the Limited Liability Compan</u> (A Florida Limited Li	y as it now appears on our records.) ability Company)
The Articles of Organization for this Limited Liability Company via Florida document number <u>L17000144255</u> This amendment is submitted to amend the following:	vere filed on JULY 05, 2017 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabil	ity company here:
EGPA SERVICES	LLC
The new name must be distinguishable and contain the words "Limited Liability"	y Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	9350 KETAY CIRCLE
(Principal office address MUST BE A STREET ADDRESS)	BOCA RATON, FL, 33428
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	9350 KETAY CIRCLE BOCA RATON, FL, 33428
B. If amending the registered agent and/or registered office adapted and/or the new registered office address here:	ddress on our records, <u>enter the name of the new registere</u>
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
	Florida
	City Zip Code
New Registered Agent's Signature, if changing Registered Agent:	
I hereby accept the appointment as registered agent and agree	e 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 adde or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	ESTEVAD ABREU	9350 KETAY CIRCLE	□Add
		BOCA RATON, FL, 33428	□Remove
			X Change
AMBR	FLAVIA ABREU	9350 KETAY CIRCLE	□Add
		BOCA RATON, FL, 33428	Remove
•	•		X Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change

If an ci Note:	tive date, if other than the date of filing:
e reco	and specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the filed.
Dated	March 26, 2020
	Signature of a member of authorized representative of a member