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COVER LETTER

	of Corporations		
EAS'	Y TAXES LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Artic	cles of Amendment and fee(s) are sub	mitted for filing.	
Please return all co	orrespondence concerning this matter	to the following:	
	VICTOR H JIMENEZ FE	RNANDEZ	
		Name of Person	
	EASY TAXES LLC		
		Firm/Company	
	3812 RUNNING DEER D	PRIVE	
	<u> </u>	Address	
	ORLANDO,FL,32829		
	 	City/State and Zip Code	
	casytaxes19@gmail.com	to be used for future annual report noti	fication)
For further inform	ation concerning this matter, please c	·	
VICTOR H JIME	NEZ FERNANDEZ	407 734-8562	
	Name of Person	at () Area Code Daytim	e Telephone Number
Enclosed is a chec	k for the following amount:		
☐ \$25.00 Filing	_	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
<u>Mailing A</u> Registra	Address: ation	Street Address: Registration Se	ction

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

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Comp (A Florida Limited	pany as it now appears on our d Liability Company)	records.)
The Articles of Organization for this Limited Liability Compan Florida document number <u>L1300009167</u>	ny were filed on <u>04/</u> C	$\frac{9/2048}{}$ and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lia		
EASY TAXES 3 MOCE LLC The new name must be distinguishable and contain the words "Limited Liab		
The new name must be distinguishable and contain the words "Limited Lial	bility Company," the designation	on "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable:		
• •		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	e address on our records,	enter the name of the new registered
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida stree	address
		, Florida
	City	Zip Code

New Registered Agent's Signature, if changing Registered Agent:

FASY TAXES 110

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 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

$\mathbf{AMBR} = A$	Authorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			□Add
			□Remove
			□Change
			□Add
			ПRетоve
			Change
			□ Add
			□Remove
			☐ Change
			Change
			□Add
			□Remove
			□Add
			□Remove
			Change

If amer	ding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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(If an effe	re date, if other than the date of filing:
he record	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 d.
Dated 1	, 2023 , 2023
	Signature of a member or amborized representative of a member
	VICTOR H JIMENEZ FERNANDEZ
	Typed or printed name of signee

Filing Fee: \$25.00