

L18000 109825

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

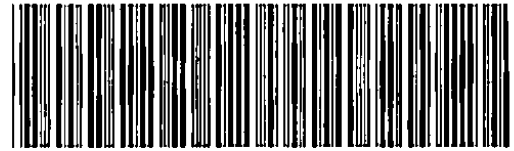
(Business Entity Name)

(Document Number)

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2019 SEP 18 PM 12:30

C. GOLDEN

OCT -2 2019

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: EASY FL PROPERTIES, 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:

DAVID SVENSON
Name of Person

EASY FL PROPERTIES, LLC
Firm/Company

5113 Avery Rd
Address

NEW PORT RICHEY, FL 34652
City/State and Zip Code

DAVE@EASYFLPROPERTIES.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

DAVID SVENSON at (727) 688-1100
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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

7. 1. 1.

2019 SEP 18

(A Florida Limited Liability Company)

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or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type</u>
MGR	JOE BATZIN	2882 GULF to BAY BLVD, 236 CLEARWATER FL 33759	<input checked="" type="checkbox"/> A
			<input type="checkbox"/> C
			<input type="checkbox"/> A
			<input type="checkbox"/> R
			<input type="checkbox"/> C
			<input type="checkbox"/> A
			<input type="checkbox"/> Re
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			<input type="checkbox"/> Ad
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			<input type="checkbox"/> Ren
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			<input type="checkbox"/> Add
			<input type="checkbox"/> Rem
			<input type="checkbox"/> Char

Lined area for additional information or notes.

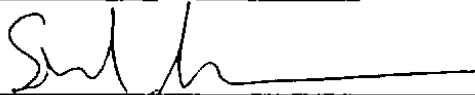
E. Effective date, if other than the date of filing: _____ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earliest date that meets the requirements of (b) The 90th day after the record is filed.

Dated SEPTEMBER 15, 2019.



Signature of a member or authorized representative of a member

DAVID SVENSON

Typed or printed name of signee