

118000270159

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

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12/12/18--01005--030 **25.00

19 JAN 17 PM 2:10
RECEIVED
STATE
OFFICE

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: EZ Traveller 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:

Ahmed Elbadawy
Name of Person

EZ Traveller LLC
Firm/Company

12338 W Sample Rd.
Address

Coral Springs, FL 33065
City/State and Zip Code

ahmedelbadawy9@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Ahmed Elbadawy at (973) 337 0265
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|---|--|--|--|
| <input 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

19 JAN 17 PM 2:40

STATE OF FLORIDA
DIVISION OF CORPORATIONS



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 21, 2018

AHMED ELBLADAWY
EZ TRAVELLER LLC
12338 W SAMPLE RD
CORAL SPRINGS, FL 33065

SUBJECT: EZ TRAVELLER, LLC
Ref. Number: L18000270159

We have received your document for EZ TRAVELLER, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

If you are removing managers from your limited liability company you have completed the wrong application. The application you completed is for the registered agent only. Please see the attached forms.

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) 245-6050.

Diane Cushing
Senior Section Administrator

Letter Number: 218A00026258

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

EZ Traveller LLC

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

The Articles of Organization for this Limited Liability Company were filed on Nov 20th 2018 and assigned Florida document number 118000270159.

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)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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:

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 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

19 JAN 17 PM 2:40
FILED
CLERK OF CIRCUIT COURT
IN AND FOR THE COUNTY OF DALLAS, TEXAS

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	Ahmed ELbadawy	12338 W Sample Rd. Coral Springs 33065	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Change
MGR	Muhammed A. ELbadawy	12338 W Sample Rd. Coral Springs 33065	<input checked="" type="checkbox"/> Add <input checked="" type="checkbox"/> Remove <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Change

D. ~~If not filing any other information concerning the estate, attach additional (if need necessary.)~~

E. ~~Elected date of death other than the date of filing:~~ (optional)

If an effective date is used, the date must be a specific date from a private ordering filing or the date on which the filing is made under 2010 Act 107 (3)(b)

Note: If the date entered in this block does not meet the applicable statutory filing requirements, this date will be disregarded as the document is not effective on the date of death of the decedent.

If the record specifies a date of death that is not the effective date, the effective date of the record is: (E) The 90th day after the record is filed.

Dated Jan 16th 2019

Ahmed Elbadawy
Signature of the person on whom the record is made

Ahmed Elbadawy
Typed name of the person on whom the record is made