## 1190000005573

(Re	equestor's Name)	)
(Ad	ldress)	
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PICK-UP	☐ WAIT	MAIL
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(Do	ocument Number	)
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2021 OCT 22 PM 3: 05

## **COVER LETTER**

Registration Section

**Division of Corporations** 

TO:

SUBJECT:	Name of Lim	ited Liability Company			
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please return all correspo	ondence concerning this matter	to the following:			
	Mark Malevskis				
		Name of Person			
	EHB09242021 LLC				
	<del></del>	Firm/Company	<del></del>		
	107 N 11th St				
		Address			
	Tampa FL 33602				
	<del></del>	City/State and Zip Code			
	mark@emperorhousebuyers				
	E-mail address: (	to be used for future annual report noti	tication)		
For further information c	oncerning this matter, please c	all;			
Mark Malevskis		813 616-0123			
Name o	f Person	Area Code Daytim	ne Telephone Number		
Enclosed is a check for th	ne following amount:				
■ S25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)		
Mailing Address Registration 5	Section	Street Address: Registration Se			
Division of Corporations P.O. Box 6327			Division of Corporations The Centre of Tallahassee		
Tallahassee, l			2415 N. Monroe Street, Suite 810		

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

EHB09242021 LLC

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(Name of the Limit	ed Liability Company as it now appears on our re (A Florida Limited Liability Company)	cords.)
	(A Florida Limited Liability Company)	SECRETARY OF SECTION TALLY
The Articles of Organization for this Limited Li	ability Company were filed on 01/03/2019	
Florida document number L19000005573		
This amendment is submitted to amend the follo	owing:	
A. If amending name, enter the new name of	f the limited liability company here:	
Emperor Companies LLC		
The new name must be distinguishable and contain the w	ords "Limited Liability Company," the designation	"LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applic	able:	
Principal office address MUST BE A STREE	T ADDRESS)	
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE	BOX)	
		· · ·
3. If amending the registered agent and/or r		nter the name of the new regist
gent and/or the new registered office addres	ss here:	
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street a	ddress
		. 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 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 = . <u>Title</u>	Authorized Member <u>Name</u>	<u>Address</u>	Type of Action
			□Add
			□Remove
			□Change
<u>_</u>			□Add
			□Remove
			□ Change
			□Add
			□ Remove
			□Change
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If an effecti Note: If	e date, if other the tive date is listed, the cate inserted in it's effective date or	date must be specifi 1 this block does 1	c and cannot be p not meet the ap	plicable statutor	ig or more than 90 y filing requiren	<b>(optional)</b> days after filing.) P ents, this date wi	ursuant to 605.0207 ( If not be listed as t
e record s rd is filed	specifies a delayed (	effective date, bu	t not an effectiv	/e time, at 12:01	a.m. on the earl	ier of: (b) The S	Oth day after the
Oc Dated	etober 16th		2021				
		M.					
		1 1	1111				
		Signature	of a member or a	uthorized represe	ntative of a memb	er	