

L19000 119161

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

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☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____

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2020 AUG 19 AM 10:01

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CLERK OF THE SUPREME COURT
TALLAHASSEE, FL

AUG 20 2020

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: EZ B+B Management 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:

Amanda Gatt
Name of Person

EZ B+B Management LLC
Firm/Company

12 Bogart Pl
Address

Merritt Island, FL 32953
City/State and Zip Code

ezmanage1@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Phil / Amanda Gatt at (381) 600-1001
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 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

EZ B+B management 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 07-20-2020 and assigned Florida document number L19000119161

This amendment is submitted to amend the following: _____

A. If amending name, enter the new name of the limited liability company here:

N/A

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)

Amendment
12 Bogart Place
Merritt Island, FL 32953
Amendment
12 Bogart Place
Merritt Island, FL 32953
FILED
2020 AUG 9 AM 10:01
32953

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:

Amanda Gatt

New Registered Office Address:

12 Bogart Pl, Merritt Island, FL 32953
Enter Florida street address

Merritt Island Florida 32953
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.

Amanda Gatt
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 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>
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to MGR
from AP

Amanda Gatt

12 Bogart PL ☒ Add

Merritt Island, FL 32953 ☐ Remove

☒ Change

MGR

Phillip Gatt Jr

12 Bogart PL ☐ Add

Merritt Island, FL 32953 ☒ Remove

☐ Change

☐ Add

☐ Remove

☐ Change

☐ Add

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☐ Remove

☐ Change

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CLERK OF STATE
TALLAHASSEE, FL

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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Remove / Change

Remove Phillip Gatt Jr. as manager.

Change Amanda Gatt from AP to manager.

Change Amanda Gatt's address from:

100 Canebreakers Dr #106, Cocoa, FL 32922

To: 12 Bogart Place, Merritt Island, FL 32953

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DEPARTMENT OF STATE
TALLAHASSEE, FL

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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 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as 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 earlier of: (b) The 90th day after the record is filed.

Dated

7/20/2020

Amanda Gatt

Signature of a member or authorized representative of a member

Amanda Gatt

Typed or printed name of signer