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Special Instructions to	Filing Officer:	

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JA-1/25/21

COVER LETTER

TO:

P.O. Box 6327

Tallahassee, FL 32314

TO: Registration Se Division of Cor			
SUBJECT: EZ	ELL KOOL SE	RUICES LLC	.•
	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	endence concerning this matter	to the following:	
	Terry	Fzell Name of Person	
	Ezell K	Services LLC	4
	14221 Sand	Pine Lane Address	
	Panama Cit	City/State and Zip Code Code	
	Ezell Kool Serv E-mail address: (ICES @ amail. Com to be used for fedure annual report notif	ication)
For further information c	oncerning this matter, please ca	all:	
Terry E.	Zell f Person	at (<u>RSO</u>) <u>B66 C</u> Area Code Daytime	Telephone Number
Enclosed is a check for th	ne following amount:		
□ \$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addres Registration S Division of C	Section	Street Address: Registration Sec	
Pivision of C	orporations	Division of Corp	701 ati 0115

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Ezell Kool Ser				
(<u>Name of the Limited</u>	l Liability Compan A Florida Limited Li	iy as it now appears lability Company)	on our records.)	
The Articles of Organization for this Limited Lia	bility Company v	were filed on <u>C</u>	9-16-2019	and assigned
Florida document number <u>L1900023</u>	<u>4113</u> .			
This amendment is submitted to amend the follow	ving:			
A. If amending name, enter the new name of	the limited liabi	lity company her	<u>e</u> :	
The new name must be distinguishable and contain the wo	rds "Limited Liabili	ty Company," the de	signation "L.L.C" or the abb	reviation "L.L.C."
Enter new principal offices address, if applica	ble:		7 9 (23
(Principal office address MUST BE A STREET	<u>`ADDRESS)</u>			20 DEC
				-
Enter new mailing address, if applicable:		14221 S	and Pine La	ne
(Mailing address MAY BE A POST OFFICE B	<u>ox)</u>	Panano	a City, FC	<u> 384447</u>
			• • • • • • • • • • • • • • • • • • •	·
B. If amending the registered agent and/or registered office address		ddress on our re	cords, <u>enter the name</u>	of the new registered
Name of New Registered Agent:			<u></u>	
New Registered Office Address:	14221	Sand F Enter Florid	inc lane	
	Para	na City	, Florida	32444 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 = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	NGUYEN, TAM	611 CARRIE LANE	
		Lynn HAVEN, FL 32444	
			□Change
			□Add
			□Rетоve
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Effective date, if other than the date of filing: 12-10-2020 (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.) Parsant to 695,0207 (3) 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 n.m. on the earlier of: (b). The 90th day after the exord is filed. Dated 12-10-2020 Typed or printed name of signer.	o. II unici	nding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
(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 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 ecord is filed. Dated 12-10-2020 Signature of a member or authorized representative of a member	_	
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Signature of a member or authorized representative of a member		
	Dated_	12-10-2020
		1 S
Terry Ezall		Signature of a member or authorized representative of a member
		Terry Ezall