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SECRETARY OF STATE

Office Use Only

TO: **Registration Section Division of Corporations**

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EB Planning LLC

SUBJECT:

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Name of Louised Liability Company

The enclosed Articles of Amendment and feets) are submitted for filing.

Please return all correspondence concerning this matter to the following:

	Francisco Benitez				
		Name of Person			
	EB Planning I LC				
		Firm?Company			
	5520 Crepe Myrtle Circle				
		Address		2022 SEC	
	Oviedo Florida 32765			2022 NOV -7	مت ا ہے، 1 1
	elyfrank l <i>ø</i> gmail com	City State and Zip Code		۲ ۲	بر الح الم الح الح الح الح الح الح الح الح الح الح
For further information c	li-mail address: (oncerning this matter, please e	to be used for future annual report noti all.	fication) Fr	PH II: II	**************************************
Francisco Benitez		407 625 3270			
Name o	of Person	at t) Area Code Daytim	e Telephone Number	·	
Enclosed is a check for th	he following amount:				
■ \$25.00 Filling Fee	C) \$36.00 Filing Fee & Certificate of States	□ \$55.00 Filing Fee & Certified Copy (additional s ₁) is enclosed.	S60.00 Filing Certificate o Certified Co tadditional cop	of Status &	
Mailino Addres	x.	Street Address:			

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

EB Planning I	.L.C

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

The Articles of Organization for this Limited Liability Company were filed on March 16.2	020 and assigned
Florida document number L20000082652	

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. "Ubinted Fiability Company," the designation "LLC" or the abbreviation "LLC,"

Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	
	2022 SEC
Enter new mailing address, if applicable:	
(Mailing address MAY BE <u>A POST OFFICE BON</u>)	
B. If amending the registered agent and/or registered office a <u>agent and/or the new registered office address here</u> :	
Name of New Registered Agent:	
New Registered Office Address:	Enter Florada street address
	, Florida

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. Thereby confirm that the limited liability company has been notified in writing of this change.

Cav

Zip Code

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person_being added</u> or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
MGR	Elizabeth Benitez	5520 Crepe Myrtle Circle Oviedo FL 32765	💻 🗃 Add
			🗋 Remove
			□Change
			🗆 Add
			🗆 Remove
			REAL Change T
			🗇 Change
			🗆 Add
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			🗆 Add
			🗆 Remove
			□Change

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

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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	10:00 AM	
	- <u>+</u> 101	
Sign	ature of a member or authorized representative of a member	
Francisco Benitez		

Typed or primted name of signee

Filing Fee: \$25.00