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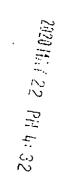
| (Re | equestor's Name) | |
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| PICK-UP | ☐ WAIT | MAIL |
| (Bu | siness Entity Nam | ne) |
| (Do | ocument Number) | |
| Certified Copies | _ Certificates | of Status |
| Special Instructions to | Filing Officer: | |
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Office Use Only



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COVER LETTER

| TO: Registration Sect Division of Corpo | | | |
|--|--|---|--|
| SURJECT: EA | SYGETTS LLC | | |
| SUBJECT. | Name of Lim | ited Liability Company | |
| | | | |
| The enclosed Articles of A | mendment and fee(s) are sub | mitted for filing. | |
| Please return all correspond | dence concerning this matter | to the following: | |
| | AKIVA | ROCKLAND Name of Person | |
| | | Name of Person | - |
| | | Easygelts | |
| | | Firm/Company | |
| | 1600 S Ocean | DATVE APT. 10-K | |
| | | Address | |
| | Hollywood | FL 33019 City/State and Zip Code | |
| | COCKLONIA | City/State and Zip Code . GKIVA @ GMAIL COM | 2 |
| | E-mail address: (| to be used for future annual report notif | ication) |
| For further information co | ncerning this matter, please c | all; | |
| Akiva Boo | CKLAND | 21,860, 478 | . 8600 |
| Name of | Person | at (<u>860</u>) 478 Area Code Daytime | : Telephone Number |
| | | | |
| Enclosed is a check for the | e following amount: | | |
| ☑ \$25.00 Filing Fee | ☐ \$30.00 Filing Fee & Certificate of Status | ☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) | ☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed) |
| Mailing Address: | | Street Address: | |
| Registration So Division of Co | | Registration Sec Division of Cor | |
| P.O. Box 6327 | • | The Centre of T | • |

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| EASYGEI | • | Lilie | 1122 | Pli 4: 32 | |
|---|--------------------------------------|---------------|----------------|----------------|--------------------|
| (Name of the Limited Liability Compa (A Florida Limited I | ny as it now app Jability Company | ears on our | records. | .) | |
| The Articles of Organization for this Limited Liability Company Florida document number <u>L 2000110137</u> | were filed on | Apcil | 22, | 2020 | and assigned |
| This amendment is submitted to amend the following: | | | | | |
| A. If amending name, enter the new name of the limited liabi | ility company | here: | | | |
| The new name must be distinguishable and contain the words "Limited Liabil | | - | | | |
| Enter new principal offices address, if applicable: | 1600 | 5 (| (cear | 1 drive | Apt. 10 - K |
| (Principal office address MUST BE A STREET ADDRESS) | 1-1011yw | 000 | FL | 330 | 19 |
| Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | 1600 1 14011yws | s 00 e | ean L | drive 33019 | Apt. 10-K |
| B. If amending the registered agent and/or registered office a agent and/or the new registered office address here: | address on our | r records, | <u>enter t</u> | he name of t | the new registered |
| Name of New Registered Agent: | | | | | |
| New Registered Office Address: | Enter F | lorida strvet | address | | |
| | | | , Flor | rida | p Code |
| | City | | | Zi | p Code |

New Registered Agent's Signature, if changing Registered Agent:

If Changing Registered Agent, Signature of New Registered Agent

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 eccept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is eing filed to merely reflect a change in the registered office address. I hereby confirm that the limited liability ompany has been notified in writing of this change.

, ii 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 | 2020 HAT 22 PT | Type of Action |
|--------------|-----------------|--------------------|----------------|----------------|
| MGR | Solomon Meltser | 1600 5 Ocean drive | upt. 10-K | _ 🗷 Add |
| | | Hollywood, FL 3 | 3019 | _ □Remove |
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| Effective date, if other than that an effective date is listed, the date in Note: If the date inserted in this bedocument's effective date on the line. | ist be specific and lock does not r | I cannot be prio neet the applic | cable statutory filir | | filing.) Pursuant to 605 | |
| ne record specifies a delayed effect ord is filed. | ve date, but not | an effective t | time, at 12:01 a.m. | on the earlier of: (b) | The 90th day afte | r the |
| Dated May 20th | | 202 | <u>o</u> . | | | |
| | | | | | | |