L20000 117545

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JUN 11 2020 S. YOUNG

COVER LETTER

TO: Registration Sect Division of Corpo			
SUBJECT: E	- Z BREAT	H LLC ,	^
	Name of Limi	ted Liability Company	
The enclosed Articles of Ar	mendment and fee(s) are subr	nitted for filing.	
Please return all correspond	lence concerning this matter t	to the following:	
	CHINE	Name of Person	LE
	E-ZB	REATH LLC Firm/Company	
	952 IN-	TERNATIONAL Address	PARKWAY
	LAKE	MARY, FL City/State and Zip Code	32746
	hellowe E-mail address: (t	- 2breath = Com o be used for future annual report not	ification)
For further information con	cerning this matter, please ca	ill:	
Che'n & clu Name of I		at (<u>407</u>) <u>90L</u> Area Code Daytin	7870 ne Telephone Number
Enclosed is a check for the	following amount:		
强\$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:
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

3

E-Z BREATH L (Name of the Limited Liability Compa (A Florida Limited L	ny as it now appears on our records.)	20 HAY 26
The Articles of Organization for this Limited Liability Company Florida document number <u>L2000 117545</u>	were filed on <u>04/30/20</u>	20 and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabil		0
Enter new principal offices address, if applicable:	•	IONAL PARKWAY
Principal office address MUST BE A STREET ADDRESS)	LAKE MARY	FL 32746_
Enter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	nddress on our records, enter the	name of the new registered
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	, Florid	la Zip Code
	Citi	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
MGR	ONYEKWELLI EMILY	952 INTERNATIONAL PARKU	□Add
		LAKE MARY, FL 32746	⊠ Remove
		952 INTERNATIONAL PARI	□Change kway
MGR	NWABUTO CHINEDU CHIDO	plue Lakemary, FL 32746	t X Add
			Remove
			□Change
 			□Add
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	nding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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Note:	ve date, if other than the date of filing:
e record rd is file	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 ed.
Dated _	·
	Signature of a member or authorized representative of a member
	A) ESAA CHINOLUC Typed or printed name of signee