L20000 131230

(Reque	stor's Name)	
(Addres	s)	
(Addres	s)	
(City/St	ate/Zip/Phone #)
PICK-UP] WAIT	MAIL
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(Docum	ent Number)	<u>-</u>
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SCHRETARY OF STATE

Name Change

JUN 1 6 2020

D CUSHING

COVER LETTER

TO: Registration S Division of Co				
	HLD, LLC	•		
SUBJECT:	Name of Limi	ited Liability Company		
The sales of Section of	6 A	acissand for filling		
	f Amendment and fee(s) are sub- ondence concerning this matter			
rease return un corresp	ondence concerning this matter	te the following.		
	CHRISTOPHER E. HENR	RIQUEZ		
		Name of Person		
		Firm/Company		
	2761 FRIGATE DRIVE			
		Address		
	ORLANDO, FL 32812			
		City/State and Zip Code		8 20
	RAMEZ@WANIS.US		25	3 - 10 20 - 10 20 - 10
P. C. d. C. C. confee		to be used for future annual report	notification)	
For further information	concerning this matter, please c	an:		
CHRISTOPHER HEN		407 455-416°		08.4Ti
Name	of Person	Area Code Day	time Telephone Number	PHORATIONS
Enclosed is a check for	the following amount:			
\$25.00 Filing Fee	S30.60 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Sound Filing Fee, Certificate of Status Certified Copy (additional copy is enclose)	
Mailing Addr Registration Division of P.O. Box 63	Section Corporations			

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

ARTICLES OF AI TO ARTICLES OF OR OF		
EFNOTY HLD LLC		- 100g - 100g
(Name of the Limited Liability Company (A Florida Limited Liab	as it now appears on our records.)	
		· · · · · · · · · · · · · · · · · · ·
The Articles of Organization for this Limited Liability Company we	ere filed on on the second	and assigned
Florida document number L20000131230		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabilit	y company here:	
EFNOTY TECH LLC		
The new name must be distinguishable and contain the words "Limited Liability	Company," the designation "LLC" or the ab	obreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office adagent and/or the new registered office address here:	dress on our records, <u>enter the nan</u>	ne of the new registered
Name of New Registered Agent:		<u></u>
New Registered Office Address:	Enter Florida street address	
	, Florida City	Zip Code
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete p accept the obligations of my position as registered agent as pr being filed to merely reflect a change in the registered office a company has been notified in writing of this change.	erformance of my duties, and I am ovided for in Chapter 605, F.S. Or	familiar with and r, if this document is
If Chang	ing Registered Agent, Signature of New Re	egistered 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>	Type of Action
			🗀 Add
			□Remove
			□Change
			□ Add
			□ Remove
			□ Change
		<u> </u>	
			□Remove
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fan effective da <u>Note:</u> If the c	e, if other than the date to is listed, the date must be ate inserted in this block fective date on the Depart	specific and cannot be p does not meet the ap	prior to date of filing o oplicable statutory fi	r more than 90 days afte	onal) r filing.) Pursuant to 605 s date will not be list	5.0207 (led as i
e record speci ed is filed.	ies a delayed effective da	ite, but not an effecti	ve time, at 12:01 a.i	n. on the earlier of: (I	o) The 90th day afte	r the
Dated	5-21-	natury of a member or		tive of a member		
	Christopho	<i>,</i> .	printed name of signe			

A Comment