

L20000139728

Florida Department of State
Division of Corporations
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2022 MAY 10 01:10:22

To:

Division of Corporations
Fax Number : 1850-912-6303

From:

Account Name : RICHARD SOUZA CORP
Account Number : 17014100068
Phone : (407) 275-2484
Fax Number : (407) 274-6319

2022 MAY 10 PM 12:05

FILED

**Enter the email address for this business entity on the form to receive future
email report filings. Enter only one email address please.**

Email Address: CONTACT@MEDEIROSSOUZA.COM

MAY 12 2022

11C AMEND/RESTATE/CORRECT OR M/MG RESIGN
2EASY INSURANCE LLC

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COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: 2EASY INSURANCE LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

RUBEM SOUZA

Name of Person

MEDEIROS SOUZA CORP

Firm/Company

845 N GARLAND AVE. STE 100

Address

ORLANDO, FL 32801

City/State and Zip Code

CONTACT@MEDEIROSSOUZA.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

RUBEM SOUZA

407

437-2709

at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the 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:

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

2022 MAY 10 PM 12:05
RECEIVED
DIVISION OF CORPORATIONS
TALLAHASSEE, FL 32303

FILED

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

2EASY INSURANCE LLC

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

The Articles of Organization for this Limited Liability Company were filed on 05/29/2020 and assigned Florida document number 1.20000139728.

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 "Limited Liability Company," the designation "LLC" or the abbreviation "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 address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

City

Florida

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 Changing Registered Agent, Signature of New Registered 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>	<u>Type of Action</u>
MGR	YU, ELIZA Y	6996 PIAZZA GRANDE AVE, STE. 309	<input type="checkbox"/> Add
		ORLANDO, FL 32835	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	YU, ELIZA Y	6996 PIAZZA GRANDE AVE, STE. 309	<input type="checkbox"/> Add
		ORLANDO, FL 32835	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	RENATO DOS SANTOS PEREIRA	6996 PIAZZA GRANDE AVE, STE. 309	<input type="checkbox"/> Add
		ORLANDO, FL 32835	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Omega International Solutions Corp	845 N GARLAND AVE, STE 100 F	<input checked="" type="checkbox"/> Add
		ORLANDO, FL 32801	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Mosaic Global CORP.	845 N GARLAND AVE, STE 100 F	<input checked="" type="checkbox"/> Add
		ORLANDO, FL 32801	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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

E. Effective date, if other than the date of filing: _____ (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.) Pursuant to 605.0207 (3)(b)

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 record is filed

Dated MAY, 09 2022

Signature of a member or authorized representative of a member

RUBEM SOUZA

Typed or printed name of signee

Filing Fee: \$25.00