

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

L20000134728

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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : MEDEIROS SOUZA CORP
Account Number : I20190000068
Phone : (407)326-8484
Fax Number : (407)604-6519

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: contact@medeirosouza.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
2EASY INSURANCE LLC

Certificate of Status	1
Certified Copy	0
Page Count	01
Estimated Charge	\$30.00

2022 AUG 10 PM 11:36

2022 AUG 10 PM 2:20
 SECRETARY OF STATE
 141 LAKEVIEW BLVD
 TALLAHASSEE, FLORIDA 32399

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 AND
 FILED

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Corporate Filing Menu

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AUG 11 2022

K. Brumley

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@medeirosouza.com

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

For further information concerning this matter, please call:

Rubem Souza

407
at (_____) _____

326 - 8484

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)

MailingAddress:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

StreetAddress:

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

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 L20000139728.

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)

6735 Conroy Road 413, ORLANDO, FL 32835

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

Florida

City

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

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TALLAHASSEE, FLORIDA

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>
AMBR	Renato dos Santos Pereira	6735 Conroy Road#13ORLANDO, FL 32835	<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
AMBR	Eliza Lo Yu	6735 Conroy Road#13ORLANDO, FL 32835	<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Change

