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(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
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TALLAHASSEE, FL

FLORIDA CAPITAL COURIER SERVICES, INC 2330 CLARE DRIVE TALLAHASSEE, FL 32309 (850) 524-5437 (850) 524-6243

Corporation Name & Document Number	(OFFICE USE ONLY) er, (if known):
1. EV DIGITAL, LLC	
Corporation Name	Document #
X Walk in	Pick up time
Mail out	Will wait
Photocopy	Certified Copy
	Certificate of Status
NEW FILINGS	<u>AMENDMENTS</u>
Profit Not for Profit Limited Liability Domestication Other -	X AmendmentResignation of R.A. Officer/DirectorChange of Registered AgentDissolution/WithdrawalMerger
OTHER FILINGS	REGISTRATION/QUALIFICATIONS
Annual Report	Foreign
Fictitious Name	Limited Partnership Reinstatement Trademark
APOSTIL COUNTRY	Other
	EXAMINER'S INITIALS:

FLORIDA CAPITAL COURIER SERVICES, INC 2330 CLARE DRIVE TALLAHASSEE, FL 32309 (850) 524-5437 (850) 524-6243

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Annual Report	Foreign Limited Partnership
Fictitious Name	Reinstatement Trademark
APOSTILCOUNTRY	Other
	EXAMINER'S INITIALS:

COVER LETTER

Registration Section

TO:

Division of Corpo	orations		
SUBJECT: EV DIGITA	AL LLC		
SUBJECT: LA BIOTA	Name of Limited	d Liability Company	
The enclosed Articles of A	mendment and fee(s) are submi	ned for filing.	
Please return all correspond	dence concerning this matter to	the following:	
	Edwin Vasquez	Name of Person	
		Name of Person	
	EV DIGITAL, LLC	Finn Company	
	5840 Red Bug Lak	(e RD,	
	Winter Springs FL 32708	City State and Zip Code	ang ayan ay desiran
	evprintscorp@gmail.com		
		n be used for future annual report notifi	ecation)
For further information co	oncerning this matter, please ca		
Edwin Vasquez		at (407) Area Code 519-1409 Daytime	
	f Person	Area Code Daytime	: Telephone Number
Enclosed is a check for the	ne 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)
Regist	ANG ADDRESS: ration Section on of Corporations	STREET/COUR Registration Section Division of Corpo	on
P.O. F	30x 6327 jassee, FL 32314	Clifton Building 2661 Executive C	enter Circle

Tallahassee, Fl. 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

EV DIGITAL, LLC (Name of the Limited L	ahility Compan orida Limited Li	y as it now appears on a ability Company)	our records.)		
The Articles of Organization for this Limited Liabili Florida document number L2000171701	ty Company v	were filed on Ob	/19/20	20_ and	d assigned
This amendment is submitted to amend the followin	g:				
A. If amending name, enter the new name of the	limited liahi	lity company here:			
hall and angle the words	"Limited Liabili	iv Company," the design	ation "LLC" or	the abbreviate	op "L.L.C."
The new name must be distinguishable and contain the words Enter new principal offices address, if applicable (Principal office address MUST BE A STREET A	•	5840 Red Bug L Winter Springs,		SECRE IARY	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO.)	<u>x)</u>	5840 Red Bug I Winter Springs,		171 CO 1	
B. If amending the registered agent and/or registered agent and/or the new registered office	registered of	ffice address on ou e:	r records.	enter the n	name of the ne
Name of New Registered Agent:	Northwest	Registered Ag	ent LLC		
	7901 4th	St N STE 300 Enter Florida	sneet address		
	St. Peters	burg	, Flori	ida 33702	<u> </u>
·		Cav		Zip	o 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

Title	Name	Address	Type of Action
AMBR	Edwin Vasquez	5840 Red Bug Lake Rd, Winter Spring, FL 32	708 🕱 Add
			Remove
			Change
			Add
			□ Remove
			Change
			S Bemove
		AHASSEE, FL	Change Change State Stat
			□ Add
			☐ Remove
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4			Add
			□ Remove

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		_ _	
Effective date, if other than the date of filing:	(optional)	_	
Effective date, if other than the date of filing: (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than Note: If the date inserted in this block does not meet the applicable statutory filing required document's effective date on the Department of State's records.	n 90 days after filing. irements, this date) Pursuant to 605, will not be liste	.0207 ed as
the record specifies a delayed effective date, but not an effective time, The 90th day after the record is filed.	at 12:01 a.m.	on the earlie	er of
Dated 07-01-2020			
Signature of authorized representative of a n	nember		

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00