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COVER LETTER

		EZ CONCESSION LLC					
SUBJEC	T:	Name of Lim	ited Liability Company				
The smale	and Amiolog of	Amoudment and fac(s) are sub-	mittad for filing				
		•	-				
ricase rei	turii air correspo	nachee concerning this matter	to the following.				
		Name of Limited Liability Company If Articles of Amendment and fee(s) are submitted for filing. In all correspondence concerning this matter to the following: TARKEYIA TAYLOR Name of Person Firm/Company 195 NW 2ND STREET Address DEERFIELD BEACH, Ft. 33441 City/State and Zip Code giftofthree@gmail.com E-mail address: (to be used for future annual report notification) Information concerning this matter, please call:					
			Name of Person				
			Firm/Company				
		195 NW 2ND STREET					
			Address				
		DEERFIELD BEACH, FL	. 33441				
			City/State and Zip Code	•			
			to be used for future annual report not	itication)			
For furth	er information c			incation)			
	YIA TAYLOR	· ·					
	Name o	f Person	at () Area Code Daytin	ne Telephone Number			
Enclosed	is a check for th	ne following amount:					
■ \$25.0	00 Filing Fcc	S30.00 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 Addres Registration S		<u>Street Address:</u> Registration Se	ection			
	Division of C	orporations	Division of Cor	porations			
	P.O. Box 632 Tallahassee, i		The Centre of 7 2415 N. Monro	Fallahassee oe Street, Suite 810			

Tallahassee, FL 32303

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

I	-11	INV	BFF7	CONCESSION LLC
1		U17 I	12 1-1-6-6-	CONCLUSION CLC

(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 Lia Florida document number £20000221982	bility Company	were filed on July 27	7, 2020	and assigned
This amendment is submitted to amend the following	wing:			
A. If amending name, enter the new name of	the limited liab	il <u>ity company here</u> :		
The new name must be distinguishable and contain the wo	rds "Limited Liabil	lity Company," the design	nation "LLC" or the ab	breviation "L.L.C."
This amendment is submitted to amend the following: A. If amending name, enter the new name of the limit The new name must be distinguishable and contain the words "Limit Enter new principal offices address, if applicable: Principal office address MUST BE A STREET ADDRE Enter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: 195 NV	ble:	195 NW 2ND ST		
Florida document number L20000221982 This amendment is submitted to amend the follow. A. If amending name, enter the new name of the new name must be distinguishable and contain the way. Enter new principal offices address, if applications of the new mailing address. MUST BE A STREE Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE) B. If amending the registered agent and/or reagent and/or the new registered office address. Name of New Registered Agent:		DEERFIELD BEAC	CH, FL 33441	
B. If amending the registered agent and/or re	gistered office a	PO BOX 3176 HALLANDALE BE		PI C D C C C C C C C C C C C C C C C C C
Name of New Registered Agent:			·- · · · · · · · · · · · · · · · · ·	
New Registered Office Address:	195 NW 2ND S			
	DEERFIELD B	Enter Florida s BEACH	street address , Florida ³³⁴	141
		City	, 1 101104	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	ALFONZO J MORGAN	195 NW 2ND ST	DAdd
		DEERFIELD BEACH, FL 33441	■Remove
			☐ Change
MGR	TARKEYIA TAYLOR	195 NW 2ND ST	≘ Add
		DEERFIELD BEACH, FL 33441	Remove
			
			E 202⊌JAH
			. □ Remove P □ □ Change
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fan effectiv <mark>Note:</mark> If t	date, if other the date is listed, the he date inserted in a cifective date of	date must be sp n this block d	ecific and cooses not me	et the applic	cable statut	ling or more ory filing re	than 90 days	optional) after filing.) s, this date	Pursuant to will not be	605.020 listed a:
record sp I is filed.	oecifies a delayed	effective date	e, but not ar	ı effective t	ime, at 12:) I a.m. on :	he earlier o	of: (b) The	e 90th day a	fter the
Dated	nuary 2nd			2021	·					
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