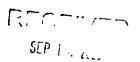
L2000244031

(Requestor's Name)	_
(Address) (Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer:	_
(Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status	_
(City/State/Zip/Phone #)	_
(Address) (Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status	
(Business Entity Name)	_
(Document Number)	_
Certified Copies Certificates of Status	_
Special Instructions to Filing Officer:	7
	╝

Office Use Only



100352069931



09/15/20--01018--011 ++30.00



OCT 23 2020 S. YOUNG

COVER LETTER

TO: Registration Section Division of Corpor			
SUBJECT: Esal	Un 1 LLC Name of Limi	ted Liability Company	
The enclosed Articles of Am	endment and fee(s) are subr	mitted for filing.	
Please return all corresponde	ence concerning this matter t	to the following:	
	Ed Dieu	Justa Name of Person	
	es all in	1 UC Firm/Company	<u></u>
	4781 n Ca	ongress the #	2136
(Boynton ?	City/State and Zip Code	الم
<u>(</u>	ESANDRE &	Damal Com o be used for future annual report notif	ication)
For further information conc	erning this matter, please ca	ill:	
Ed Dieuj Name of B	ustc	at (501) 275 Area Code Daytime	-3698 Telephone Number
Enclosed is a check for the fo	ollowing 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		Street Address	

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Esalus LLC (Name of the Limited Liability Compa)	ny as it now appears on our records.)
The Articles of Organization for this Limited Liability Company Florida document number 1200024453/	were filed on 8 11 2020 and assigned
This amendment is submitted to amend the following:	ို့ မှ
A. If amending name, enter the new name of the limited liabi	lity company here:
ida document number \(\begin{align*} \begin{align*} \DODO 244031 \\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
The new name must be distinguishable and contain the words "Limited Liabili	ity 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 a agent and/or the new registered office address here:	ddress on our records, enter the name of the new registered
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
	
	City Zin 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

Title	Name	Address	Type of Action
AMBR	Ed Dreujust	4781 n Conquess Ave #28	SCOTT Xdd
)	Boynton Boch, FL 33421	<u>O</u> □Remove
			Change
mar	Mario Deujuste		□Add
		aleen) NY, 11411	Cremove
			Change
		- .	□Add
			□Remove
			Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			Change
			□Add
		·	□ Remove
			Change

		<u> </u>				
		<u> </u>				
			-		 -	
		· -				
						
-						
						
						-
					 	
						
· · · · · · · · · · · · · · · · · · ·						
ective date, if other than n effective date is listed, the date: If the date inserted in tournent's effective date on	te must be specific an his block does not	d cannot be prior to meet the applicat			er filing.) Pursuant to	
cord specifies a delayed ef s filed.	fective date, but no	t an effective tim	ne, at 12:01 a.m.	on the earlier of:	(b) The 90th day	after the
cd 10/20/20		. 12:01ar	<u> </u>			
	(B)	un	\supset			
	Signature of a	member or author	ized representative	of a member		_
	< h \ \.	EUNSTE				