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(Re	equestor's Name)	
(Ac	ldress)	
(Ac	ldress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nar	ne)
·	·	•
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

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COVER LETTER

Registration Section
Division of Corporations

TO:

SUBJECT:	E.P. Tac	tics LLC				
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Name of Lin	nited Liability Company				
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.				
Please return all correspo	ndence concerning this matter	to the following:				
		Angelo Nunez				
		E.P. Tactics LLC Firm/Company				
		125 Balsam Dr				
		Address				
		Orlando,FL 32807 City/State and Zip Code				
		Contact@eptactics.		<u>(n)</u>	2020 SEF SUCRE TALL	
For further information co	oncerning this matter, please c	all:			WTTW - 435	estreij 1 g 1 verse 1 vanse
	Nunez	at (_407)	757-7547		9 (3)	; ;
Name of	f Person	Area Code	Daytime Tele	phone Number	7:52	الرديعة
Enclosed is a check for th	e following amount:				, .	
⊠ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee Certified Copy (additional copy is er		Certified C	of Status &	
Mailing Address Registration S Division of C P.O. Box 632	Section orporations 7	Regist Division The Co	Address: ration Section on of Corpora entre of Tallah	tions nassee	0	
Tallahassee, FL 32314			N. Monroe Str		0	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

E.P. Tactics LLC	
(Name of the Limited Liability Company as it no (A Florida Limited Liability Co	w appears on our records.) mpany)
The Articles of Organization for this Limited Liability Company were filed Florida document numberL20000247000	d on 8/13/20 and assigned
This amendment is submitted to amend the following:	
_	ouny horo:
A. If amending name, enter the new name of the limited liability comp	pany nere.
The new name must be distinguishable and contain the words "Limited Liability Compan	y," 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)	
(Maining dauress MAT BE A FOST OF FICE BOX)	
	202
B. If amending the registered agent and/or registered office address of	n our records, enter the name of the new register
agent and/or the new registered office address here:	find the many
Name of Name Descriptional Assessed	9
Name of New Registered Agent:	
New Registered Office Address:	inter 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 to provisions of all statutes relative to the proper and complete performations of my position as registered agent as provided being filed to merely reflect a change in the registered office address, company has been notified in writing of this change.	ance of my duties, and I am familiar with and for in Chapter 605, F.S. Or, if this document is

If Changing Registered Agent, Signature of New Registered Agent

f amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added r removed from our records:

4GR = Manager AMBR = Authorized Member

<u>`itle</u>	<u>Name</u>	Address	Type of Action
MBR	Jose V Flores	9803 River Pines ct , Orlando Fl 32825	□Add
			⊠Remove
			🗆 Change
MGR_	Jose V Flores	9803 River Pines ct , Orlando Fl 32825	⊠Add
			□Remove
		□Change	
			□ Add
			□Remove
			<u>co</u> □O ha nge
			120 SEd -9
			□ Rem ove
		<u> </u>	□Ghinge
			🗆 Add
			□Rстоve
			Change
	<u> </u>		□Add
			□Remove
			□Change

If amending :	any other information, enter change(s) here: (Attach additional sheets, if necessary.)	_
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	efil on	-
		-
If an effective da Note: If the d	te, if other than the date of filing:	5,0207 (2 ted as th
e record specif rd is filed.	ifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after	er the
Dated	Signature of a member of authorized representative of a member	
	Angelo Nunez	
	Typed or printed name of signee	