(((H21000114264 3)))



H210001142643ABCV

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INI.

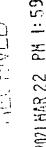
Account Number : I20000000019 Phone : (3<del>0</del>5)552-5973 Fax Number : (305)675-5944

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

Email Address:

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN **EQUITY VENTURE PARTNERS LLC**

Certificate of Status	0	
Certified Copy	0	
Page Count	04	
Estimated Charge	\$25.00	



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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

EQUITY VENTURE PARTNERS LLC	•
	ility Company as it nowappears on our record:.) ida Limited Liability Company)
The Articles of Organization for this Limited Liability (Florida document number L21000097829	Company were filed on 03/08/2021 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the lin	mited liability company here:
EQUITY VENTURE PARTNERS FL LLC	
The new name must be distinguishable and contain the words "Lir	imited 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 ADD.	ORF(S)
	, Maddy
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registere agent and/or the new registered office address here:	red office address on our records, enter the name of the new registe
Name of New Registered Agent:	MAR 22
New Registered Office Address:	
	Enter Florida street address.
	City 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.

AGE	03/04

LAZARUS CORPORATE

PA

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 =	<b>Authorized Member</b>

Title	<u>Name</u>	Address	Type of Action
		□Remove	
			□Change
		□Add	
		🗀 Remove	
			□ Change
			□Add
			□Remove
			Change
		[]Add	
		□Remove	
			□Change
<del></del>			□Add
		□Remove	
			□Change
<del></del>			□Add
			□ Remove
			□ Change

fan e <u>Note</u>	effective date, if other than the date of filing:  (optional)  (ffective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.020  If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed a ment's effective date on the Department of State's records.
e reco	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the filed.
Date	March 19, 2021
	Signature of a member or authorized representative of a member
	- garage of a member
	Jessica C. Portalatin