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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : ELLISON LAZENBY PLLC

Account Number : I20150000059 : (727)362-6151 Fax Number : (727)362-6131

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

Email Address: <u>admin@elattorneys.com</u>

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN E3 RE HOLDING 9 LLC

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Fax: (850) 617-6383

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## ARTICLES OF AMENDMENT TO

ARTICLES OF ORGANIZATION **OF** 

E3 RE HOLDING 9 LLC, a Florida		
(Name of the Limited	d Liability Company as it now appears on our records.) A Florida Limited Liability Company)	
The Articles of Organization for this Limited Lia	ibility Company were filed on 03/25/2021	and assigned
Florida document number L2100014[455	·	
This amendment is submitted to amend the follow	wing:	
A. If amending name, enter the new name of	the limited liability company here:	
2130 RE Holding LLC, a Florida limited liabilty con	mpany	
	rds "Limited Liability Company," the designation "LLC" or t	he abbreviation "L.L.C."
Enter new principal offices address, if applica	ble:	
•		
(Principal office address MUST BE A STREET	ADDRESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE B	<u></u>	
-		
	<del></del>	2021
R. If amending the registered agent and/or re	gistered office address on our records, enter the	name of the new registere
agent and/or the new registered office address	s here:	
		FILEI N 24 INSSE
Name of New Registered Agent:		
New Registered Office Address:		20 <u>20 20 </u>
	Enter Florida street address	3 S
	, Florid	
	City	7.ip 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

From: William Lazenby

Fax: 17273626151

To:

Fax: (850) 617-6383

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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	Giordano Pozzi	200 2nd Ave S. Unit 466	[]Add
		St. Petersburg, FL 33701	■ Remove
			C)Change
MGR	E3 Capital LLC	200 2nd Ave. S., Unit 466	≅Add
		St. Petersburg FL 33701	□ Remove
			☐ Change
		Remove	
			□ Change
			□Add
		Remove	
			☐ Change
			□Add
			□Remove
			□ Change
			□Add
			□Remove

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record specifies a delayed effective d	ate, but not an et	Tective time, at 1	2:01 a.m. on the	e earlier of: (b)	The 90t	_	fter th
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