K21000280872

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COVER LETTER

TO:	Registration Sec Division of Corp					
SUBJE(EZ2, LLC					
SUBJE	CI	Name of Limi	ted Liability Company			
The enc	losed Articles of a	Amendment and fee(s) are sub-	mitted for filing.			
Please r	eturn all correspo	ndence concerning this matter	to the following:			
		Scott J. Wortman, Esq.				
		<u> </u>	Name of Person			
		SJW Law Group, PLLC				
			Firm/Company			
		12300 South Shore Blvd., S	Suite 202		(۱۰, رز
			Address		••	
		Wellington, FL 33414		, !		
			City/State and Zip Code	· \ //: 21/		
		scott@sjwlawgroup.com			··	
		E-mail address: (I	to be used for future annual report notificatio	n) 21		
For furt	her information co	oncerning this matter, please ca	al]:			
Danielle	e Ring		561 340-4563			
-	Name o	f Person	Area Code Daytime Tele	phone Number		
Enclose	ed is a check for th	ne following amount:				
■ \$25	5.00 Filing Fee	☐ \$30.00 Filing Fec & 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:
Registration Section
Division of Corporations P.O. Box 6327

Street Address: Registration Section Division of Corporations The Centre of Tallahassee

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

EZ2, LLC			_
(Name of the Limited Liability Company (A Florida Limited Liab	as it now appears on our re ility Company)	cords.)	
The Articles of Organization for this Limited Liability Company we Florida document number L21000280872	ere filed on 6/16/2021	and	assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liability	y company here:		
The new name must be distinguishable and contain the words "Limited Liability	Company," the designation "	'LLC" or the abbreviation	ı "L.L.C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)			
_	<u>.</u>		
		()	
Enter new mailing address, if applicable:			<u>()</u>
Mailing address MAY BE A POST OFFICE BOX)			
_			
3. If amending the registered agent and/or registered office add	lress on our records, et	nter the name of the	new registo
gent and/or the new registered office address here:	<u></u>		`.
		24	
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida street ac	ddress	
		, Florida	
	City	Zip C	ode

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

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	Consuelo C Sabates	1002 White Drive	
		Delray Beach, FL 33483	□Remove
			≡ Change
			□ Add
			□Remove
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		24
ective date, if other than the date of filing:	(optional	
effective date is listed, the date must be specific and cannot be prior to date of the listed in this block does not meet the applicable state. If the date inserted in this block does not meet the applicable statement's effective date on the Department of State's records.	f filing or more than 90 days after filing	z.) Pursuant to 605.02
cord specifies a delayed effective date, but not an effective time, at I stiled.	2:01 a.m. on the earlier of: (b) T	he 90th day after th
ed July 15 , 2021		
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