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## Division of Corporations

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## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN EFRAIN PLAZA, PLLC

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## **COVER LETTER**

	gistration Sec dision of Corp			
SURTECT:	EFRAIN PL	.AZA. PLLC		
SOBSTACE		Name of Lim	ited Liability Company	
The enclosed	f Articles of	Amondment and fee(s) are sub	mitted for filing.	
Please return	all correspo	ndence concerning this matter	to the following:	
		Cheyenne Moseley		
			Name of Person	
		Legalzoom.com, Inc.		
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		10-00-00-00-00-00-00-00-00-00-00-00-00-0	City/State and Zip Code	
		DR.PLAZA7@GMAIL.CO		
		E-mail address: (	to be used for future annual report noti	fication)
For further is	nformation co	oncorning this matter, please c	ali:	
Cheyenne M	foseley		800 773-0888	
	Name of	Person	at ()	e Telephone Number
Enclosed is	a check for th	e following amount:		
	Filing Fee		S55.00 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 Tallahassee, FI. 32314 STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassec, FL 32301 ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

EFRAIN PLAZA, PLLC				AHA AHA	NOV	-17
(Name of the Limited	Liability Compa	my as it now appears or Liability Company)	n our records.)	HSSE FRY	8-1	FILED
The Articles of Organization for this Limited Lia Florida-document number L21000353830	bility Company			#RY OF STATE ASSEE, FORIDA	PH링2: 39	ED
This amendment is submitted to amend the follow	ving:					
A. If amending name, enter the new name of the	the limited liab	ility company here	:			
The new name must be distinguishable and contain the wo	rds "Limited Liabi	lity Company," the desig	gnation "LLC" or the abb	oreviation "L.I		<b>*</b> +**
Enter new principal offices address, if applicable:		590 Palm Springs l	Dr.			
(Principal office address MUST BE A STREET		Altamonte Springs, FL 32701				
		<u></u>				<b>-</b> -
Enter new mailing address, if applicable:		590 Palm Springs	ľbr			
		Altamonte Springs, Ft, 32701				
(Mailing address MAY BE A POST OFFICE B	<u>ON</u>					
B. If amending the registered agent and/o registered agent and/or the new registered off		œ:	our records, <u>enter (</u>		af the	<u>new</u>
New Registered Office Address:	590 Palm Spri	<del></del>				
	Enter Florida street address  Attamonte Springs			701		
	Anamonic api	Ciţı	, Florida <u>327</u>	Zip Code		
New Registered Agent's Signature, if changing Re	egistered Agent:	<u>.</u>				
I hereby accept the appointment as registered provisions of all statutes relative to the prope accept the obligations of my position as regist being filed to merely reflect a change in the recompany has been notified in writing of this company has been notified in writing of this content.	r and complete tered agent as cyistered office	: performance of m provided fox in Chi	y duties, and I am fo apter 605, F.S. Or, s	amiliar wit if this docu vised liabili	h and ment i ly	is
	If Cha	nging Repistered Agen	t, Signature of New Res	Efrair		ıza
	17 (.114	meruk 33kmierra viken	or section of the section		-	

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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	<u>Name</u> PLAZA GONZALEZ, EFRAIN J	Address	Type of Action
AMBR			
			□ Remove
		590 Palm Springs Dr. Altamonte Springs, FL 32701	☐ Change
			□ Add
			□ Remove
			□ Change
***********			□ Add
			☐ Remove
			Change
<del></del>			Add
			☐ Remove
			☐ Change
			☐ Remove
			Change
	Value of the Control		□ Add
			□ Remove
			□ Change

506176383	Page: 6 of 6	2021-11-08 07:13:11 PST	LegalZoom com, Inc.	
D. If amending	g any other information, c	nter change(s) here: (Attach additio	mal slivets, if necessory.)	
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Specify Imprograph and			war ( )	
(If an effective <u>Note:</u> If the	ite, if other than the date of date is listed, the date must be spe date inserted in this block do offective date on the Departm	ecific and cannot be prior to date of filing or most meet the applicable statutory filing	(optional) fore than 90 days after fiting.) Pursuant g requirements, this date will not be	to 605.0207 (3)(b) e listed as the
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Dated	11/4	0/2021	TALLAH	2021 NOV
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