

11/8/21, 9:10 AM

Division of Corporations

L21000353030

Florida Department of State
Division of Corporations
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To:

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2021 NOV -8 PM 12:39
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

Certificate of Status	0
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NOV 9 2021

S. PRATHER

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Corporate Filing Menu

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: EFRAIN PLAZA, PLLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:

Cheyenne Moseley
Name of Person
Legalzoom.com, Inc.
Firm/Company
101 N Brand Blvd 11th Fl
Address
Glendale, CA 91203
City/State and Zip Code
DR.PLAZA7@GMAIL.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Cheyenne Moseley 800 773-0888
at ()
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- ☐ \$25.00 Filing Fee
- ☐ \$30.00 Filing Fee &
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
Tallahassee, FL 32314

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

EFRAIN PLAZA, PLLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

FILED
2021 NOV -8 PM 12:39
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 08/05/2021

Florida document number L21000353830

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited 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 ADDRESS)

590 Palm Springs Dr.

Altamonte Springs, FL 32701

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

590 Palm Springs Dr.

Altamonte Springs, FL 32701

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

Efrain Plaza

New Registered Office Address:

590 Palm Springs Dr.

Enter Florida street address

Altamonte Springs

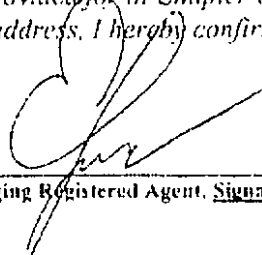
Florida 32701

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.



Efrain Plaza

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>	<u>Address</u>	<u>Type of Action</u>
AMBR	PLAZA GONZALEZ, EFRAIN J		<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
		590 Palm Springs Dr. Altamonte Springs, FL 32701	<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Change

[illegible]

Filing Fee: \$25.00