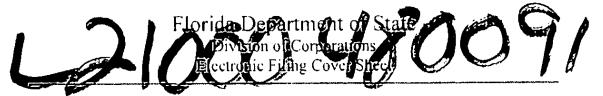
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Division of Corporations



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Registration Section Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

COVER LETTER

TO: Registration So Division of Con						
E-LITE PE	ERMITTING SERVICES LLC					
SUBJECT:	Name of Limited Liability Company					
	'Amendment and fee(s) are sub-					
	Cheyenne Moseley					
		Name of Person				
	Legalzoom.com, Inc.					
		Firm/Company				
	101 N Brand Blvd 11th Fl					
	Address					
	Glendale, CA 91203					
	elite.permitfl@gmail.com	City/State and Zip Code	-			
	E-mail address: (to be used for future annual report notification)					
For further information	concerning this matter, please ca	ail:				
Cheyenne Moseley		800 773-0888				
Name	of Person	at () Area Code Daytime	Telephone Number			
Enclosed is a check for	the following amount:					
□ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)			
МАН	LING ADDRESS:	STREET/COURI	ER ADDRESS:			

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

To: +18506176383 .

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

E-LITE PERMITTING SERVICES LLC		
(Name of the Limited Liability Compan (A Florida Limited L	y as it now appears on our re- lability Company)	cords.)
The Articles of Organization for this Limited Liability Company Florida document number 1.21000480091	were filed on 11/05/2021	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabi	lity company here:	
Ember Permitting LLC		
The new name must be distinguishable and contain the words "Limited Liabili	ty 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)		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here		ords, enter the name of the nev
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street oa	klress
		. Ftorida
	Сиу	Zip Code
New Registered Agent's Signature, if changing Registered Agent;		62
I hereby accept the appointment as registered agent and agre provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my dutie. provided for in Chapter 6 address, I hereby confiri	s, and I am familiar with and 05, F.S. Or if this decument is in that the limited liability [] F.O. I.
If Char	ging Registered Agent, Signa	ture of New Repristered Agent

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MGR = Manager

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

AMBR =	Authorized Member		
<u>l'itle</u>	Name	Address	Type of Action
			Add
			☐ Remove
			□ Change
	<u> </u>		
			☐ Remove
			☐ Change
			Add
			□ Remove
			Change
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			Change

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	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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he re The	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of 90th day after the record is filed.
Dated	14th April . 2022
	Signsture of a member or authorized representative of a member
	Erica McCurdy Typed or printed name of signer

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Filing Fee: \$25.00