# L22000000509

(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:





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## FLORIDA DEPARTMENT OF STATE Division of Corporations

October 4, 2023

ASHLEY CORBETT 4425 CAROLWOOD ST ORLANDO, FL 32812

SUBJECT: E&A CORBETT ENTERPRISES LLC

Ref. Number: L22000000509

We have received your document for E&A CORBETT ENTERPRISES LLC and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a Florida Profit Corporation, but your entity is a LLC. Please complete and return the enclosed blank form(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Morgan E Lovett Regulatory Specialist II

Letter Number: 523A00022868

Division of Commentions D.O. DOV 0207 Well-berry Elevide 2021

## COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: EGA COV bett Enter Dy Ses UC 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:	
ASN'ey Corbett Name of Person	
EGA COYDELL ENTEXPOSES UC	
4425 Can Wood St	
ON and Fu 32812  City/State and Zip Code	
E-Robbil address: (to be used for future annual report houtication)	. ~
For further information concerning this matter, please call:	
ASMUL COVOLH at (253) 686 3797 Area Code Daytime Telephone Number	• - - •
Enclosed is a check for the following amount:	• • • • • •
☐ \$25.00 Filing Fee \$\ \text{S30.00 Filing Fee & Gertificate of Status} \text{Certified Copy (additional copy is enclosed)} Certified Copy (additional copy is enclosed	us &

Mailing Address:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee. FL 32303

### ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

EGA COVDET ENTEXPRISES LLC

(A Florid	da Limited Liability Company)	
The Articles of Organization for this Limited Liability Florida document number	Company were filed on 2021 127	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lir	nited liability company here:	
The new name must be distinguishable and contain the words "Li	mited Liability Company," the designation "LLC" or t	he abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADE	ORESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
	<u>-</u>	1
B. If amending the registered agent and/or register	red office address on our records, enter the	name of the new registered
agent and/or the new registered office address here	:	2:
N CN D in address		
Name of New Registered Agent:		<u> </u>
New Registered Office Address:	Enter Florida street address	<u> </u>
	, Florid	a.
	City . Florid	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.

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
MBR	Ashley Corbett	4425 Cavol Wood S	bbA <b>X</b> _ <u>t</u>
	V	Orlando, FL32812	□Remove
			□Change
MBR	Evic Corbett	4425 Carol Wood St	_ □Add
		Orlando, FL 32812	□Remove
			(XChange
			□Add
			□Remove
			□Change
			□ Remove \. `
			=
			□Add
			□Remove
			□Change
			□Add
			Remove
			□Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) E. Effective date, if other than the date of filing: (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed. Signature of a member or authorized representative of a member

Filing Fee: \$25.00