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| 12220 | 100 2711. |
| (Requestor's Name) (Address) | 700408252867 |
| (Address) (City/State/Zip/Phone #) | |
| Business Entity Name) | 05,/03/2301023031 ★★60.00 |
| (Document Number) Certified Copies Certificates of Status | SECRETA |
| Special Instructions to Filing Officer: | -8 AM 9:53 ASSECTIONS |
| Office Use Only | |
| | A. RIVERS |

JUL - 9 2023

COVER LETTER

TO: Registration Section Division of Corporations

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Got Power, LLC
SUBJECT:

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:

| | Brett Vickers | | |
|-----------------------------|---|--|--|
| | Name of Person | | |
| | Got Power LLC | | |
| | Firm/Company | | |
| | 100 2nd Ave. S STE 105 S | | |
| | Address | | |
| | St. Petersburg, FL 33701 | | |
| | <u> </u> | City/State and Zip Code | |
| | heidi@rogsunshine.com | | |
| | E-mail address: (| to be used for future annual report notifi | (cation) |
| For further information c | oncerning this matter, please c | all: | |
| Heidi Green | | 727 293-5100 | |
| Name o | f Person | Area Code Daytime | Telephone Number |
| Enclosed is a check for the | he following amount: | | |
| □ \$25.00 Filing Fee | □ \$30.00 Filing Fee & Certificate of Status | S55.00 Filing Fee & Certified Copy (additional copy is enclosed) | S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) |
| | | | |

<u>Mailing Address:</u> Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 <u>Street Address:</u> 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

Got Power, LLC

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

| The Articles of Organization for this Limited Liability Company were filed on <u>12/23/2021</u> | and assigned |
|---|--------------|
| Florida document number L22000002715 | |
| This amendment is submitted to amend the following: | |
| A. If amending name, enter the new name of the limited liability company here: | |
| EQ1 Restaurant Group, LLC | |

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."

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 office address on our records, <u>enter the name of the new registered</u> agent and/or the new registered office address here:

| Name of New Registered Agent: | | SEC | 4 8202 | |
|---|------------------------------|---------------------------------------|------------------|--|
| New Registered Office Address: | | | AY - | |
| | Enter Florida street address | | - ώ - | |
| | . Florida | 20 | AM | |
| | City | $O_{\underline{S}} = \mathbf{Z}_{ip}$ | ्र टेकी ट ज | |
| New Registered Agent's Signature, if changing Registered Agent: | | io m | Č.) | |

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 addec or removed from our records:

MGR = Manager AMBR = Authorized Member

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| <u>Title</u> | <u>Name</u> | Address | Type of Action |
|--------------|--|--------------------------|----------------|
| MGR | Lisa Vickers | 536 10th Ave. S. | # Add |
| | | St. Petersburg, FL 33701 | |
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

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| | $\frac{05/01/2023}{(antional)}$ |
| E. Ellec (If an e | tive date, if other than the date of filing: |
| Note: | If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the |
| docur | nent's effective date on the Department of State's records. |
| | |
| | |
| f the reco | rd 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 t | |

| d | 2023 | |
|-----------------|---|--------------------------------|
| | 11-11 | |
| | T M | |
| \mathcal{U} | Signature of a member or authoriz | zed representative of a member |
| Brett K Vickers | | |
| | The second se | |

Typed or printed name of signee