L22000 116753

(Re	equestor's Name)			
(Ac	ddress)			
(Ac	ddress)			
(Ci	ity/State/Zip/Phone #)			
PICK-UP	MAIL MAIL			
(Ві	usiness Entity Name)			
(Document Number)				
Certified Copies	Certificates of Status			
Special Instructions to				
May M				
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Office Use Only



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COVER LETTER

TO:

Registration Section

Division of Corpe	orations		
SUBJECT:	EPC	CHARTERS, LL	
	Name of Limit	ed Liability Company	
The enclosed Articles of A	mendment and fee(s) are subn	nitted for filing.	
Please return all correspond	dence concerning this matter to	o the following:	
	JOR	6E FLEITAS Name of Person	JR.
		Firm/Company	
	1006 E 9	54.	
	-(Address	
	Lehigh a	Address Cres FL 33° City/State and Zip Code Out Or War annual report notification of the contract of the con	572
		Chyrstangand Zip Code	11/ com =
	E-mail address: (t	o be used for future annual report notifi	cation)
			cation)
	ncerning this matter, please ca		
lacce Fi	loitas	at (239) 8/0- Area Code Daytime	-7053 ···
Name of	Person	Area Code Daytime	Telephone Number
Enclosed is a check for the			☐ \$60,00 Filing Fee.
S25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy	Certificate of Status &
		(additional copy is enclosed)	Certified Copy (additional copy is enclosed)
lecady suln	n/Lted		\.
		es a dalam or	
Mailing Address		<u>Street Address:</u> Registration Sec	ction
Registration S Division of Co		Division of Cor	porations
P.O. Box 632	7	The Centre of T	
Tallahassee, F	FL 32314	2415 N. Monro Tallahassee, FL	e Street, Suite 810 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited	HARTE	ERS, LL	-C·			_	
(<u>Name of the Limited</u> (A	Liability Comp Florida Limited	any as it now app Liability Compan	y) I	o <u>rds.</u>)			
The Articles of Organization for this Limited Liab Florida document number <u>4 22000 [[6</u>		were filed on	3/7/	hz_	and :	assigned	
This amendment is submitted to amend the follow	ring:						
A. If amending name, <u>enter the new name of th</u>							
The new name must be distinguishable and contain the word	ds "Limited Liab	ility Company," d	ie designation "L	LC" or the abb	reviation	"L.L.C."	
Enter new principal offices address, if applicab	ole:						_
(Principal office address MUST BE A STREET	<u>ADDRESS)</u>					.	
Enter new mailing address, if applicable:					· · · · ·		<u> </u>
(Mailing address MAY BE A POST OFFICE BO	<u>0X)</u>					- [2 - [2 - [2	<u>;</u>
B. If amending the registered agent and/or regagent and/or the new registered office address	gistered office <u>here</u> :	address on ot	ir records, <u>ent</u>	er the name	of the	new regi	stered
Name of New Registered Agent:		Jorge	Fleit	45			_
New Registered Office Address:	1006	2 F 9 Enter	S † · Florida street ada	hess			
	Lehigl	Enter City	<u>s</u> .	Florida	<u>339</u> Zip Ci	1 <u>7 2</u> ode	

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.

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>	Address	Type of Action
	N/A		□Add
	'		□Remove
			Change
	-N/A		
			Remove
			Change
	N/A		, , , , , , , , , , , , , , , , , , ,
			Remove
	4		☐Change
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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 dark of filing or more than 90 days a Note: If the date inserted in this block does not meet the applicable statutory filing requirements, document's effective date on the Department of State's records.	p tional) after filing.) Pursuant to 60 , this date will not be lis	– 05,0207 (3)(sted as the
f the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of ecord is filed.	f: (b) The 90th day aft	ter the
Dated May 2 th 2023. Signature of a member of authorized representative of a member		
Typed or printed name of signee	es IV.	

Filing Fee: \$25.00