## 122000222531

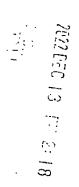
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## **COVER LETTER**

TO:

TO: Registration Se Division of Cor			
EA-CVG, I	LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	John Hoffman, Esq.		
		Name of Person	
	Hoffman & Hoffman, P.A		
		Firm/Company	27
	66 W. Flagler Street, Suite	: 200	353233
		Address	
	Miami, FL 33130		- <del></del>
	-	City/State and Zip Code	nanpa.com
		rito@hoffmanpa.com; sandra@hoffn	•
f f t f . f		to be used for future annual report notifi	cation)
For further information c	oncerning this matter, please c	au:	
Maggie Brito, Esq.		305 372.2877 at ()	
Name o	f Person	Area Code Daytime	Telephone Number
Enclosed is a check for the	ne following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy tadditional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addres Registration 5		<u>Street Address:</u> Registration Sec	tion
Division of C		Division of Corp	oorations
P.O. Box 632		The Centre of To	
Tallahassee.	FL 32314	2415 N. Monroe	Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

EA-CVG, LLC		
( <u>Name of the Limited Liability</u> (A Florida	Company as it now appears on our record- limited Liability Company)	<u></u> }
The Articles of Organization for this Limited Liability Co	ompany were filed on 05/11/2022	and assigned
Florida document number L22000222531		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limit	ed liability company here:	
The new name must be distinguishable and contain the words "Limit	ed Liability Company," the designation "LLC"	or the abbreviation FLL.C.
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRI	ESS)	
		<i>\tilde{\</i>
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered agent and/or the new registered office address here:	office address on our records, <u>enter</u>	the name of the new registered
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
-	, Flo	orida
	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.

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
T	Guy Tickner	657 South Drive, Suite 306	□Add
		Miami Springs, FL 33166	■Remove
			□Change
MGR	Keith Bateman	600 Skyline Drive	🗆 Add
		New Smyrna Beach, FL 32618	□Remove
			□ Change
			☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐
			☐ Change
			□Remove
			□Change
		<u> </u>	
			□Remove
			□ Change
			□Remove
			□Change

We are also amending the Articles of Organization to remove G	Guy Tickner (whose title was "T")
from the list of persons authorized to manage the Company.	
	2022 C
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	<del></del>
	<del></del>
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ve date, if other than the date of filing:	(optional)
date must be specific and cannot be prior to date	
ment's effective date on the Department of State's records.	
ord specifies a delayed effective date, but not an effective time, at filed.	12:01 a.m. on the earlier of: (b) The 90th day af
December 8 2022 d	
10070	

Filing Fee: \$25.00

Typed or printed name of signee