Florida Department of State

Division of Corporations

Electronic Filing Gover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H22000349154 3)))



H220003491543ABC/

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : ELLISON LAZENBY PLLC

Account Number : I20150000059 Phone : (727)362-6151 Fax Number : (727)362-6131

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: admin@elattorneys.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN EB 1049 CENTRAL, LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

FILED FILED FILED

Electronic Filing Menu

Corporate Filing Menu

Help



October 12, 2022

FLORIDA DEPARTMENT OF STATE
Division of Corporations

EB 1049 CENTRAL, LLC 262 4TH AVE N. ST PETERSBURG, FL 33701

SUBJECT: EB 1049 CENTRAL, LLC

REF: L22000397681

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The document is illegible and not acceptable for imaging.

If you have any further questions concerning your document, please call (850) 245-6051.

KYLE D BRUMBLEY FAX Aud. #: H22000349154

Regulatory Specialist II Supervisor Letter Number: 222A00022792

Registration Section

Page: 3 of 5 10/12/2022 9:41 AM H22000349154 3

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

EB 1049 CENTRAL, LLC		
(<u>Name of the Limited L</u> (A F	iability Company as it now appears on our records.) lorida Limited Liability Company)	
·		
The Articles of Organization for this Limited Liabil	ity Company were filed on 09/14/2022	and assigned
Florida document number L22000397681		
Ptorida document number	 -	
This amendment is submitted to amend the followir	ng:	
A. If amending name, enter the new name of the	e limited liability company here:	
The new name must be distinguishable and contain the words	"Limited 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 A	DDRESS)	
		<u></u>
m . 92 11 92		
Enter new mailing address, if applicable:	· · · · · · · · · · · · · · · · · · ·	
(Mailing address MAY BE A POST OFFICE BO)	<u></u>	
B. If amending the registered agent and/or regis		name of the new registered
agent and/or the new registered office address he	<u>ere</u> :	
		· N
Name of New Registered Agent:		022
		26 00
New Registered Office Address:		
	Enter Florida street address	THE ROLL OF THE PARTY OF THE PA
	. Florid	
=	City	: Zip Code
New Registered Agent's Signature, if changing Regi	stered Agent:	
		6
I hereby accept the appointment as registered as	gent and agree to act in this capacity. I furthe	r agree to comply with the
provisions of all statutes relative to the proper a accept the obligations of my position as register	ma complete performance of my auties, and i	Or if this document is
being filed to merely reflect a change in the regis	eu agent as provideu for in Chapter 605, 1 :5. istered office address. I hereby confirm that th	ne limited liability
company has been notified in writing of this cha		
condensity was open weather to make all the con-	J	
		B 14 Live
	If Changing Registered Agent, Signature of Ne	w Registered Agent

From: William Lazenby Fax: 17273626151

To:

Fax: (850) 617-6383

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records: H22000349154 3

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Bravo Tango Management, LLC	262 4TH AVE N.	□Add
		ST PETERSBURG, FL 33701	■ Remove
			□Change
MGR	EASTMANBLAKE, LLC	200 2ND AVE. S., Unit 466	■Add
		St. Petersburg, FL 33701	□ Remove
			□Change
			□Add
			Remove
			□Change
			□∧dd
			Remove
			□Change
			🗆 Add
			Remove
			Change
			□Add
			□Remove
			□Change

				 -	
	<u> </u>				
	<u> </u>				
			 -		
					· · · · · · · · · · · · · · · · · · ·
					<u> </u>
			· · · · · · · · · · · · · · · · · · ·		<u></u>
				· · ·	<u> </u>
					
			. ,		
ective date, if c			· <u> </u>	(opti	onal)
n effective date is li	ther than the date of filing ted, the date must be specific and erted in this block does not n	cannot be prior to	date of filing or mon	e than 90 days after	filing.) Pursuant to 6
cument's effective	date on the Department of S	tate's records.		•	
	,	·		•	
ecord specifies a	elayed effective date, but not	an effective time	e, at 12:01 a.m. on	the earlier of: (b	i) The 90th day af
is fil ed .		•			•
		2022			
October 11			./ 1		
ted October 11				·	
October 11	(zed representative o	fa member	

Filing Fee: \$25.00