## L22000436174

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## COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: EBELINICLOSED IT LLC 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:
Jordan Ebelini Name of Person
Insight Finance Group
915N. Franklin St. Suite 2023
Tampa FL 33602 City/State and Zip Code
E-mail address: (to be used for further annual report notification)
For further information concerning this matter, please call:
Jordan Ebelini at (239) 910-0297  Nume of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount: The violable of Status Sectificate of Status Certified Copy (additional copy is enclosed)  Enclosed is a check for the following amount: The violable of Status Section of Status Sect

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 Tallahassec, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(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>Ort 10.2022</u> and assigned Florida document number <u>L22000436174</u>
This amendment is submitted to amend the following:
A. If amending name, enter the new name of the limited liability company here:  The Note of Control of the designation "LLC" or the abbreviation "LLC"  Enter new principal offices address, if applicable:  (Principal office address MUST BE A STREET ADDRESS)  Tompor FL 33602
Enter new malling 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, enter the name of the new registered agent and/or the new registered office address here:  Name of New Registered Agent:    Mark A. E.   Mark
New Registered Office Address: 1625 Hendry St. Suite 301  Enter Florida stryet wildress  Ft. Myers , Florida 33901  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 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>	Name	<u>Address</u>	Type of Action
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Note:	re date, if other than the date of filing:
e record rd is file	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 d.
Dated _	12/14/23
	Jordan Eletine
	Signature of a member or authorized representative of a member
	Jordan Eterlin

Filing Fee: \$25.00