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COVER LETTER

FO: Registratio Division of	n Section Corporations
	EBOYZ LLC
SUBJECT:	Name of Limited Liability Company
The enclosed Article	s of Amendment and fee(s) are submitted for filing.
Please return all corr	espondence concerning this matter to the following:
	NADIA HIPOLITA
	Name of Person
	BUSINESSROCKET, INC
	Firm/Company
	15442 VENTURA BLVD STE 101
	Address
	SHERMAN OAKS, CA 91403
	City/State and Zip Code
	DOCS@BUSINESSROCKET.COM
	E-mail address: (to be used for future annual report notification)
For further informat	ion concerning this matter, please call:
NADIA HIPOLITA	310 424-5558 at ()
Na	me of Person Area Code Daytime Telephone Number
Enclosed is a check	for the following amount:
□ \$25.00 Filing Fo	ce ☐ \$30.00 Filing Fee & ☐ \$55.00 Filing Fee & ☐ \$60.00 Filing Fee. Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)

Mailing Address: Registration Section Division of Corporations P.O. Box 6327

Street Address: Registration Section Division of Corporations The Centre of Tallahassee

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BROKEBOYZ LLC			
(Name of the Umited Unbits Compa (A Florate Limited)	n) as It non appears of Labelity Company)	ear uccerds)	
The Articles of Organization for this Limited Liability Company Florida document number 1.2300022(80)	were filed on 05 (M)	2023	and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liah	ility company here:		
The new name must be distinguizhable and contain the words "Limited Liabi	hty Company," the design	nation "LLC" or the abi	restation "L.I. C."
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 agent and/or the new registered office address here:	address on our reco	rds, <u>enter the nam</u>	e of the new registered
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida	street ocklress	177
	<u> </u>	Florida	Zip Cale
	Cığı		ир сые
New Registered Agent's Signature, if changing Registered Agent			
I hereby accept the appointment as registered agent and ag provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as heing filed to merely reflect a change in the registered offic- company has been notified in writing of this change.	e performance of my provided for in Cha	v duties, and I am j apter 605, F.S. Or,	lamiliar with and if this document is
II Cha	anging Registered Agent	, Signature of New Re	gistered Agent

.. 7 Det 27 Pril2: 46

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

Title	Name	<u>Address</u>	Type of Action
'AMBR	DANIEL MERINO	476 RIVERSIDE AVE	Dadd
		JACKSONVII.LH, FL	≘Rето\е
		32202	[] Clange
MGR	NICOLAS MORALIES CARVAJAI.	1000 BRICKELL AVE, STE 715	
		MIANI, FL	□Remove
		33131	□ Clrange
	<u></u>		DAdd
			□Remoye
			□ Change □
			DRemove_
			OChange
			①Add
			□Remove
			□Chruge
			ORemove
			Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)		
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E. Effective date, if other than the date of filing: (If m effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 60 Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be lit document's effective date on the Department of State's records.	os 0207 (376)	Lut.
If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day affectord is filed.	ter the Fin	•
Dated November 6th , 2023		
Signature of a member of definitived representative of a member		ı
POLIMA NGANGU EDUARDO MIGUEL ORELLANA		•
Typed or printed name of signee		