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Special Instructions to Fi	ning Officer.	
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Office Use Only



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AUG = 4 2023

COVER LETTER

Division of Corporations
SUBJECT: T- E2280+19 1k 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:
Ohri- An Joseph Jarra lox Name of Person
I- Ezzratia IIc Firm/Company
3100 Swert boy Avr Apt 3213
Panama CHy, florida 32405
E-mail address: (to be used for future annual report netification)
For further information concerning this matter, please call:
Name of Person at (301) 655-3615 Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
☐ \$25.00 Filing Fee ☐ \$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) Certified Copy (additional copy is enclosed)
Mailing Address: Street Address: Pagintentian Soution

Registration Section

TO:

Registration Section

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ARTICLE	S OF ORGANIZATION	<u> </u>
	OF	
I - Ezzential (Name of the Limited Liabi (A Florid	lity Company as it now appears on ou da Limited Liability Company)	r records CALTARY FIATE
The Articles of Organization for this Limited Liability	Company were filed on July	25, 2023 and assigned
Florida document number <u>L 23000 35015</u>		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lin		
The new name must be distinguishable and contain the words "Lin	mited Liability Company," the designation	on "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADD Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered	Apl 3213, Florida 32 3100 Surel Apl 3913, Florida 321 ed office address on our records	Panama City 405
agent and/or the new registered office address here:		
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida stree	et address
		, Florida
	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 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		
AMRP = Authorized Member		

<u>Title</u>	<u>Name</u>	Address	Type of Action
			□ Add
			□Remove
	8		□ Change
			□Add
			□Remove
			Change
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ective date, if o	ther than the date of filing: (optional)
<u>te:</u> If the date in:	ther than the date of filing:
ecord specifies a c s filed.	lelayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after th
red	.
· - 	
	# · ·
	Signature of a member or authorized representative of a member Cl2r/ Typed or printed name of signee

Sheri-Ann Frazer

3100 Sweetbay Ave

Apt 3213

Panama City.

Florida 32405

July 25.2023

Registration Section

Division of Corporations

The Centre Of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassec, Fl 32303

Dear Sir/Madam

This letter is to authorize

Name: Frantz Demosthenes .to act on my behalf in all possible manners to take of all the mattes regarding the article of amendment for I-Ezzential LLC to 8FIVE0 LLC. Besides, he is also authorized to sign all the documents required regarding this matter. This authorization letter is valid for two weeks.

Sincerely.

Sheri-Ann Frazer

State of Florida, County of Bay

The foregoing instrument was acknowledged before me this 25D ay of TVLY 2023 by SHUKT ANN IRAZER who produced TAMACTA PASTICIES

Notary Public State of Florida
Bryssa Troike
My Commission
MH 26215
Exp. 5.5 2126