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COVER LETTER

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TO: Registration Section **Division of Corporations**

EZSI. Enterprise, LLC

SUBJECT:

۰.

Name of Limited Liability Company

Dear Sir or Madam;

The enclosed Statement of Correction and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Enrique Torres

Name of Person

EZSU Enterprise, LLC

Firm/Company

405 Everwood Dr

Address

Kissimmee, FL 34743

City/State and Zip Code

rickytrzsl@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

hrique Torros at (321) 278 988/ Name of Person Area Code Daytime Telephone Number

Certified Copy

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 Tallahassee, FL 32303

Enclosed is a check for the following amount:

S25 Filing Fee

□ \$30 Filing Fee & □\$55 Filing Fee & Certificate of Status

□ \$60 Filing Fee. Certificate of Status & Certified Copy



STATEMENT OF CORRECTION FOR FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

Pursuant to section 605.0209, F.S., this document is being submitted to correct a previously filed document.

EZSL Enterprise LLC EXSL Enterprise LLC

SECOND: The Florida Document number of the limited liability company is:

Article of Organization
<u>THIRD</u>: Document to be corrected is:_____

(CHECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEMENT

Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows:

Article 1 of the Articles of Organization, the word "Enterprise" is spelled incorrectly. Currently says ENTREPRISE:

Should read ENTERPRISE. The whole name should be as follows-

EZSLEnterprise , LLC

<u>OR</u>

Was defectively signed.	The manner in which the document was defectively signed and the appropriate	⊗ c <u>o</u> rtecti	ion are
as follows:		MAR 2	بر میں ا ب ا م
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OR		L t	

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□ The electronic transmission of the record was defective.

tenature of Authorized Representative

111 / 2024

Signature of new registered agent, if applicable :(NOTE: if correcting the registered agent, the new registered agent must sign accepting the designation).

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.

Agent's Signature Registe

Filing Fee: Certified Copy:

\$25.00 \$30.00 (optional)