

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL				
OMB Number:	3235-0104			
Estimated average burden				
nours per response	e 0.5			

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

(Print or Type Responses)							
1. Name and Address of Reporting Person* HANREHAN Cheryl Edith	Statement (Month/Day/Year)		3. Issuer Name and Ticker or Trading Symbol EzFill Holdings Inc [EZFL]				
(Last) (First) (Middle) C/O EZFILL HOLDINGS, INC., 2125 BISCAYNE BLVD, #309			Reporting Person(all applicable) 10% Owner	Filed(Mon	5. If Amendment, Date Original Filed(Month/Day/Year)		
(Street) MIAMI, FL 33137			X_ Officer (give title Other (specify		Applicable I _X_ Form fi	6. Individual or Joint/Group Filing(Check Applicable Line) X_Form filed by One Reporting PersonForm filed by More than One Reporting Person	
(City) (State) (Zip)	Table I - Non-Derivative Securities Beneficially Owned						
1. Title of Security (Instr. 4)	2. Amount of Securities Beneficially Owned (Instr. 4)		ned F		4. Nature of Indirect Beneficial Ownership (Instr. 5)		
Common Stock	26,573		D				
Reminder: Report on a separate line for each class o Persons who respond unless the form display Table II - Derivative	d to the collection ays a currently va	of informatio	n contained in th		·		
1. Title of Derivative Security (Instr. 4) 2. an (M)	Date Exercisable ad Expiration Date fonth/Day/Year) ate Expiration xercisable Date	3. Title and A Securities Un Security (Instr. 4)	·•	4. Conversion	5. Ownership Form of Derivative Security: Direct (D) or Indirect (I)	6. Nature of Indirect Beneficial Ownership (Instr. 5)	

Reporting Owners

	Relationships				
Reporting Owner Name / Address	Director	10% Owner	Officer	Other	
HANREHAN Cheryl Edith C/O EZFILL HOLDINGS, INC. 2125 BISCAYNE BLVD, #309 MIAMI, FL 33137	X		COO		

Signatures

/s/ Cheryl Hanrehan	09/14/2021
**Signature of Reporting Person	Date

Explanation of Responses:

- * If the form is filed by more than one reporting person, see Instruction 5(b)(v).
- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, See Instruction 6 for procedure.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.