

# 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)   |  |  |  |                                     |   |  |  |                                  |
|---|--|--|--|-------------------------------------|---|--|--|----------------------------------|
| Name and Address of Reporting Person*  Reyes Luis Alejandro   | 2. Date of Event Requiring Statement (Month/Day/Year) — 09/14/2021 |  | 3. Issuer Name and Ticker or Trading Symbol EzFill Holdings Inc [EZFL] |                                     |   |  |  |                                  |
| (Last) (First) (Middle)<br>C/O EZFILL HOLDINGS, INC., 2125<br>BISCAYNE BLVD, #309                                 |  |  | 4. Relationship of<br>Issuer (Check<br>X Director                      | Reporting Person<br>all applicable) | Filed(Mor   | 5. If Amendment, Date Original Filed(Month/Day/Year) |  |                                  |
| (Street) MIAMI, FL 33137  |  |  |  | Officer (give tit below)            |   | 6. Individual Applicable X Form                      | 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 Sec<br>Beneficially Own<br>(Instr. 4)                 |  | ned  |                                     | 4. Nature of Indirect Beneficial Ownership (Instr. 5) |  |  |                                  |
| Common Stock  | 13,286   |  |  | D                                   |   |  |  |                                  |
| Reminder: Report on a separate line for each class  Persons who respoi unless the form disp  Table II - Derivativ | nd to the c<br>plays a cui   | ollection<br>rently va                                 | of info  | ormatio<br>IB cont                  | n contained in t<br>rol number.                       |  | ·  |                                  |
|   | 2. Date Exe  |  |  |                                     | mount of  | 4. Conversion  | 5. Ownership   | 6. Nature of Indirect Beneficial |
| (Instr. 4)  |  |  | rities Un<br>rity  | derlying Derivativ                  | or Exercise Price of Derivative                       | Form of Derivative Security: Direct                  | Ownership<br>(Instr. 5)  |                                  |
|   | Date<br>Exercisable  | Expiration<br>Date                                     | Title  | Amoun<br>Shares                     | t or Number of  | Security   | (D) or Indirect<br>(I)<br>(Instr. 5)   |                                  |

### **Reporting Owners**

|  | Relationships |              |         |       |  |
|--|---------------|--------------|---------|-------|--|
| Reporting Owner Name / Address   | Director      | 10%<br>Owner | Officer | Other |  |
| Reyes Luis Alejandro<br>C/O EZFILL HOLDINGS, INC.<br>2125 BISCAYNE BLVD, #309<br>MIAMI, FL 33137 | X             |              |         |       |  |

## **Signatures**

| /s/ Luis Reyes                   | 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.