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SECALDANASSEE, FL

AUG 1 5 2019 C Kinsey

COVER LETTER

TO:		istration Se ision of Cor			
SUBJI	ECT.	Eco Effect	LLC		
SUBJI	r.C 1 ;		Name of Lim	ited Liability Company	
The en	iclosed	Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please	return	all correspo	ndence concerning this matter	to the following:	
			Payton Stockman		
				Name of Person	
				Firm/Company	_
			16975 Colony Lakes Blvd.		
			Address		
			Fort Myers, FL, 33908		
			E-mail address: (to be used for future annual repo	rt notification)
For fur	ther in	formation co	oncerning this matter, please ca	ıll:	
Paytor	n Stock	man		at ()	
-		Name of	Person	Area Code D	aytime Telephone Number
Enclos	ed is a	check for th	e following amount:		
■ \$2	5.00 Fi	ling Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF.

ECO Effect LLC			
(<u>Name of the Limited Liability Cor</u> (A Florida Limi	mpany as it now appears on our records.) ted Liability Company)		
The Articles of Organization for this Limited Liability Compa	any were filed on 04/30/2019	and a	ssigned
Florida document number L19000116948			
This amendment is submitted to amend the following:			
A. If amending name, <u>enter the new name of the limited l</u>	iability company here:		
EcoEffect LLC			
The new name must be distinguishable and contain the words "Limited L	iability Company," the designation "LLC" or	the abbreviation "	L.L.C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS	2		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)		<u>v</u> 2	
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B. If amending the registered agent and/or registered	d office address on our records, <u>e</u>	nter the pame	of the nev
registered agent and/or the new registered office address l	<u>here</u> :	SŠE P	(FI)
		HO:	
Name of New Registered Agent:		<u> </u>	
New Registered Office Address:		∤-1 ·	
	Enter Florida street address		
	, Floric	la	
	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 AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
			_ _ _ _ _ \ Add
			☐ Remove
			Change
•			Add
			□ Remove
			☐ Change
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			□ Change
			□ Add
			□ Remove
			Change
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			☐ Change

). If ame	nding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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(If an effe <u>Note:</u>	ive date, if other than the date of filing:
	ford specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of 90th day after the record is filed.
Dated	07/29/2019.
	37/29/2019. Signature of a member or authorized representative of a member
	Signature of a member or authorized representative of a member
	Payton Stockman

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00