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A. RIVERS

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COVER LETTER

ECHO LC				
•	Name of Lim	ited Liability Company		
sed Articles of	Amendment and fee(s) are sub	mitted for filing.		
		_		
	Merritt A. Gardner			
		Name of Person		
	Gardner Law Firm			
		Firm/Company		
	4950 W. Kennedy Blvd., S	te. 600		
	 ··	Address	· · · · · · · · · · · · · · · · · · ·	
	Tampa, Florida 33609			
		City/State and Zip Code		
	- · · · ·			
	E-mail address: (to be used for future annual report no	otification)	
information c	oncerning this matter, please co	all:		
Gardner		813 288-9600		
Name o	f Person	Area Code Dayti	me Telephone Number	
s a check for th	ne following amount:			
) Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy tadditional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
		Street Address: Registration S	ection	
Division of Corporations		Division of Co	Division of Corporations	
			Tallahassee oe Street, Suite 810	
	ed Articles of mall correspondence of the mall c	Name of Lim Name of Lim Ped Articles of Amendment and fee(s) are sub It all correspondence concerning this matter Merritt A. Gardner Gardner Law Firm 4950 W. Kennedy Blvd., S Tampa, Florida 33609 mgardner@magardner.com E-mail address: (c) Gardner Name of Person S a check for the following amount: Filing Fee Certificate of Status Mailing Address: Registration Section Division of Corporations O. Box 6327	ECHO LC Name of Limited Liability Company	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ECHO LC		
(Name of the Lim	ited Liability Company as it now a (A Florida Limited Liability Comp	appears on our records.) pany)
The Articles of Organization for this Limited I	Liability Company were filed o	on <u>07/17/2002</u> and assigned
Florida document number L02000018020		
This amendment is submitted to amend the fol	lowing:	
A. If amending name, enter the new name of	of the limited liability compa	iny here:
The new name must be distinguishable and contain the	words "Limited Liability Company,	"the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if appli	cable:	
(Principal office address MUST BE A STREA	ET ADDRESS)	
		
Enter new mailing address, if applicable:		ريم دي دي
(Mailing address MAY BE A POST OFFICE	BOX)	· · · · · · · · · · · · · · · · · · ·
		2,
B. If amending the registered agent and/or agent and/or the new registered office addre	**	our records, enter the name of the new registor
Name of New Registered Agent:	Merritt A. Gardner	
New Registered Office Address:	4950 W. Kennedy Blvd., Ste	e. 600
The Winds of the Treatment	Ent	ter Florida street address
	Tampa	Florida 33609
	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>	Name	Address	Type of Action
MGR	Jane N. Pugh (Deceased)	3016 Graham Lane	□Add
		Tampa, Florida 33618	≣Remove
			□Change
			□Add
			[]Change
			□ Add
			□Change
		H	□Add
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an eff ote:	ve date, if other than the date of filing:
recor is fil	I specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
ated	August 3rd 2023
	4 Λ , \
	Signature of a member or authorized representative of a member

Filing Fee: \$25.00