L08000094011

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J. BRYAN

DEC - 9 2008

EXAMINER

COVER LETTER

Registration Section

Division of Co	rporations			
summer Eco De	seign Fabrice II C			
SUBJECT: Eco Design Fabrics, LLC (Name of Limited Liability Company)				
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.		
	ondence concerning this matter	_		
		to the rono wing.		
	Katherine Pacheco			
		(Name of Person)		
	Eco Design Fabrics, LLC	;	<u> </u>	
		(Firm/Company)	OBDEC -8 PH 2:5	
	PO BOX 771421		5 8	
	FO BOX 11 1421	(Address)	- 8 CO	
			P 7	
	Miami FL 33177	(City/State and Zip Code)	23	
			52	
For further information	concerning this matter, please c	all:		
Katherine Pacheco		at (305) 360-5537		
(Name of Person)		(Area Code & Daytime T	elephone Number)	
	•			
Enclosed is a check for	the following amount:	·		
☑ \$25.00 Filing 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	
		(udditional copy is cholosed)	(additional copy is enclosed)	
MAII	ING ADDRESS:	STREET/COURIER	ADDRESS:	
Registration Section		Registration Section		
Division of Corporations P.O. Box 6327		Division of Corporation Clifton Building	ons	
Tallahassee, FL 32314		2661 Executive Center Tallahassee, FL 32301		

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Eco Design Fabrics, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

(<i>Ç</i> ,
The Articles of Organization for this Limited Liability Comp	03, 2008 and assigned	
Florida document number L08000094011		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	liability company here:	
The new name must be distinguishable and end with the words "L.L.C."	Limited Liability Company,"	he designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRES.	<u>S)</u>	
Enter new mailing address, if applicable:	PO BOX 771421	
(Mailing address MAY BE A POST OFFICE BOX)	MIAMI, FL 33177	
B. If amending the registered agent and/or registered registered agent and/or the new registered office address		ecords, enter the name of the new
registered agent and/of the new registered office address	nere.	
Name of New Registered Agent:		· - · · · · · · · · · · · · · · · · · ·
New Registered Office Address:		
	(Enter F	lorida street address)
		, Florida
	(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 608, 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 the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager MGRM = Managing Member

<u>Title</u>	Name	Address	Type of Action
MGRM	DILMA E PACHECO	16083 SW 138 PLACE Miami, FL 33177	Add Remove
			Add Remove
			Add Remove
D. If amen —	ding any other information, enter c	hange(s) here: (Attach additional sheets, if necessary.)	_
- -			# 1_ 1
 Dated	,		PERMIT PROPERTY OF THE 2: 53
	Signature of a mo	emby or authorized representative of a member	
	Katherine E Pache		
	Namenne E Pache	CO Typed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00