L09000003741

(Requestor's Name)		
(Address)	600162478056	
(Address)	000102470000	
(City/State/Zip/Phone #)	·	
PICK-UP WAIT MAIL		
(Business Entity Name)	and the company of th	
(Document Number)	11/08/0901031013 **50.00	
Certified:Copies <u>क्ष्यक्षक्षक्ष</u> Certificates of Status <u>क्षांक्षक्र</u>	en e	

Special Instructions to Filing Officer:

L. SELLERS

NOV -9 2009

EXAMINER

Office Use Only

SECRETABLY OF STATE

COVER LETTER

TO: Registration S Division of Co			
SUBJECT:	EcoLife Ho	me Improvements	
0	Name of Lim	ited Liability Company	
The enclosed Articles o	f Amendment and fee(s) are su	bmitted for filing.	
Please return all corresp	ondence concerning this matter	r to the following:	
	****	Bryan lannuzzi	
		Name of Person	
	EcoLife Home Improvements		
	Firm/Company		
705 Boardwalk Dr. #426			
	Address		
	Ponte	e Vedra Beach, FL, 32082	
	- 4	City/State and Zip Code	······································
	Brya	anlannuzzi@yahoo.com	
	E-mail address: (to be used for future annual report notifica	ation)
For further information	concerning this matter, please	call:	
Ві	yan lannuzzi	at (586) 4	89-3757
	of Person	Area Code & Daytime	
Enclosed is a check for	the following amount:		
[7] \$25,00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Sectificate of Status & Certificate Copy (additional copy is enclosed)
Regis	LING ADDRESS: tration Section	STREET/COURIE Registration Section	
Division of Corporations		Division of Corporat	10112

P.O. Box 6327 Tallahassee, FL 32314

Registration Section Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Name of the Limited Liability Compa (A Florida Limited I	nprovements, llc nv as it now appears on our records.) Liability Company)			
The Articles of Organization for this Limited Liability Company were filed onjune 30 2009 and assigned Florida document numberL09000063741				
This amendment is submitted to amend the following:				
A. If amending name, <u>enter the new name of the limited liab</u>	ility company here:			
The new name must be distinguishable and end with the words "Limi" L.L.C."	ted Liability Company," the designation "LLC" or the abbreviation			
Enter new principal offices address, if applicable:	1100 Shetter Ave #201			
(Principal office address MUST BE A STREET ADDRESS)	Jacksonville Beach, FL, 32250			
Enter new mailing address, if applicable:				
Mailing address MAY BE A POST OFFICE BOX)				
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her Name of New Registered Agent:				
	हैं ई ग			
New Registered Office Address:	Enter Florida street address			
	City $ \gtrsim Zip$ Code			
New Registered Agent's Signature if changing Registered Agent.	₽ ™ 2			

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, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

MGRM = Managing Member **Address** <u>Title</u> Name | Type of Action Remove ☐ Add Remove _ Add ☐ Remove Remove ∏Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Richard Diethelm address change 500 Boardwalk Dr. #216 Ponte Vedra Beach, FL, 32082 October 13 2009 Dated_ Signature of a member or authorized representative of a member SNAN JANNUEZI

Typed or printed name of signee
Page 2 of 2

Filing Fee: \$25.00