## L10000038748

(Requestor's Name)					
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(Cit	y/State/Zip/Phone	#)			
PICK-UP	☐ WAIT	MAIL			
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(Do	cument Number)				
Certified Copies	_ Certificates	of Status			
Special instructions to	Filing Officer:				
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Office Use Only



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S. HAWKES

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EXAMINER

## **COVER LETTER**

TO:	Registration S Division of Co					
SUBJE	ECT:	Echelon	Real Estate LLC			
0000		Name of Lim	ited Liability Company			
The en	closed Articles o	f Amendment and fee(s) are sul	bmitted for filing.			
Please	return all corresp	ondence concerning this matter	r to the following:			
		Neil Blair-Bennett				
			Name of Person			
		-	Firm/Company			
	19711 MARINO LAKE CIR #1103					
		F.C.	Address			
		FC	DRT MYERS, FL 33913  City/State and Zip Code			
		E-mail address: (	neilbb4@gmail.com to be used for future annual report notification)			
For fur	ther information	concerning this matter, please of				
Neil Blair-Bennett			at (_239 ) 645-3798			
	Name	of Person	Area Code & Daytime Telephone Number			
Enclos	ed is a check for	the following amount:				
\$25	5.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & S60.00 Filing Fee, Certified Copy (additional copy is enclosed)  Certified Copy (additional copy is enclosed)			
MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		tration Section on of Corporations 30x 6327	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301			

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

( <u>Name of the Limited</u> (A		I Estate LLC  ny as it now appears Liability Company)	on our records.)	10 PR 2			
_	rticles of Organization for this Limited Liability Company were filed on04/09/2010and assigned a document number L10000038748						
This amendment is submitted to amend the following	wing:			ALLE			
A. If amending name, enter the new name of	the limited liab	oility company here:					
The new name must be distinguishable and end with "L.L.C."	1 the words "Limi	ited Liability Company	," the designation "I	LC" or the abbreviation			
Enter new principal offices address, if applicable:		1009 NE 8TH STREET #4					
(Principal office address MUST BE A STREET ADDRESS)		CAPE CORAL, FL 33909					
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE I	19711 MARINO LAKE CIR #1103 FORT MYERS, FL 33913						
B. If amending the registered agent and/or the new registered off			r records, enter t	he name of the new			
Name of New Registered Agent:	NEIL BLAIR-BENNETT						
New Registered Office Address:	19711 MARINO LAKE CIR #1103  Enter Florida street address						
	FO	RT MYERS _	, Florida	33913			
		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, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

MGRM = Managing Member **Title** <u>Name</u> <u>Address</u> Type of Action MGR ISRAEL EMORY 19640 MARINO LAKE CIRLE #2603 FORT MYERS, FL 33913 ☐ Add ✓ Remove ☐ Add ☐ Remove ☐ Add Remove  $\prod Add$ Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) APRIL 19th 2010 . Dated Signature of a member or authorized representative of a member NEIL BLAIR- BENNETT Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00

. · Neil Blair-Bennett

Daytome Phone Number: 239 645 3798

Return Address: 19711 Marino Lake Circle #1103 Fort Myers, Fl 33913