<u>(10000070122</u>

(Requestor's Name)
(Address)
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PICK-UP WAIT MAIL
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(Business Entity Name)
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SECRETARY OF STATE
TALL AHASSEE, FLORIDA

T. CLINE

JUL 20 2010

EXAMINER

COVER LETTER

70 P1-4	-41	•	
TO: Registration Se Division of Cor			
SUBJECT: ETH	NFC NAME ON Name of Limit	ECO TS AND MO	DRE!, L.L.C.
			CAP.
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	2742
Please return all correspo	ndence concerning this matter	to the following:	
	Colleen X	Prky Name of Person	
	ETHNICA	/AME ECO-T'S A Firm/Company	NO MORE!, L.L.C.
:	PO BOY 6	2566 Address	TALL.
	JARPON S	SPRDUGS FL 3 City/State and Zip Code	SECRETARY OF THE SECRETARY
		to be used for future annual report notification	on) FLORING 5
For further information c	oncerning this matter, please of	all:	DO 7
Collect A. +	ikar d Person	at 727 939-2710	0,4, 01 727-331-7187, Ce
Enclosed is a check for the			
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy
mony order \$ 10196457333		(additional copy is diviosed)	(additional copy is enclosed)
Registi Divisio	ING ADDRESS: ration Section on of Corporations	STREET/COURIER Registration Section Division of Corporation	
	ox 6327 assee, FL 32314	Clifton Building 2661 Executive Cente Tallahassee, FL 32301	

Remove the petiod

whome both mans to members (morns)

That You - are

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

remove <u>period</u> only please

The Articles of Organization for this Limited Liability Company were filed on <u>D</u> 7-	01-2010 and assigned
Florida document number 110000070122	
This amendment is submitted to amend the following:	tim+ comma
A. If amending name, enter the new name of the limited liability company here:	tim+ comma
ETHNIC NAME ECO-T'S AND MORE! The new name must be distinguishable and end with the words "Limited Liability Company	" the designation "I I C" or the abbreviation
"L.L.C." Ballund PIM	The designation ELC of the aboreviation
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	>=
Enter new mailing address, if applicable:	SEE FLOR
(Mailing address MAY BE A POST OFFICE BOX)	Şm 3
B. If amending the registered agent and/or registered office address on ou	

New Registered Agent's Signature, if changing Registered Agent:

New Registered Office Address:

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.

Enter Florida street address

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	•	
<u>Title</u>	Name	Address	Type of Action
MGR	Mr. Larry A. Malsam	627 Kenneth Way TARPON STRANGS, FC 34689	Add Remove
MGRM	Mr. Larry A. Malsam	627 Kenneth Way TARPON SPRENES, FO 34689	Add Remove
	•		Add Remove
MGR	Mr. Anthory John Pikos	3749 Sablewood Or. Hollday, Fr. 26	Add Remove
MGRA	Mr. Anthony John Piker	3749 Saldewood Dr. SAL Holiday 1 FL	Add Remove
- 			Add Remove
D. If amer	nding any other information, enter change	(s) here: (Attach additional sheets, if necessary.)	
			_
_			
			_
			_
Dated D	7-10-2010	·	
	Calle F	A. Pikas	
	Signature of a member of	of authorized representative of a member	
	Colleen A. Pi	Kor	<u> </u>
	Typed o	r printed name of signee	

Page 2 of 2

Filing Fee: \$25.00