

L10000078698

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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B. KOHR

MAY 17 2012

EXAMINER



300231601193

05/03/12--01033--015 **30.00

FILED
12 MAY 15 AM 4:55
DIVISION OF CORPORATIONS

FILED
12 MAY 15 AM 8:56
DIVISION OF CORPORATIONS



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 8, 2012

ENOCK BONHEUR
E-CHECK, LLC
1528 N.W. 7TH AVENUE
MIAMI, FL 33136

SUBJECT: E-CHECK, LLC
Ref. Number: L10000078698

FILED
12 MAY 15 AM 8:56
DIVISION OF CORPORATIONS
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12 MAY 15 AM 4:55
DIVISION OF CORPORATIONS

We have received your document for E-CHECK, LLC and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We received only the cover sheet and the first page of your filing.

Please sign and complete the SECOND PAGE of the Amendment document, and return the cover page and both pages of the Amendment.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Buck Kohr
Regulatory Specialist II

Letter Number: 712A00013820

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: E-check LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Enock Bonheur
Name of Person

E Multi-Solutions LLC
Firm/Company

1528 NW 7 Ave
Address

Miam. FL 33136
City/State and Zip Code

echeck1528@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Enock Bonheur at (954) 661-7915
Name of Person Area Code & Daytime Telephone 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 (additional copy is enclosed)

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

FILED
DIVISION OF CORPORATIONS
12 MAY 15 AM 8:56

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

E-Check, L.L.C.

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

The Articles of Organization for this Limited Liability Company were filed on 7/27/10 and assigned
Florida document number L10000078698.

FILED
CLERK OF CIRCUIT COURT
IN AND FOR THE COUNTY OF
DADE
12 MAY 15 AM 8:56

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

E Multi-Solutions, L.L.C.

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

Enter Florida 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, 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>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove

_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove

_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove

_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove

_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

Dated May 7, 2012.

x 

Signature of a member or authorized representative of a member

Enock Bonheur, Mgr.

Typed or printed name of signee

Page 2 of 2

Filing Fee: ~~\$25.00~~ \$30