(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
. (Do	cument Number)	
Certified Copies	_ Certificates	of Status
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J. SAULSBERRY EXAMINER OCT 26 2011

COVER LETTER

TO: Registration S Division of Co					
SUBJECT:					
SUBSECT:		INDUSTRIES LLC ted Liability Company			
	f Amendment and fee(s) are sub condence concerning this matter				
		Thomas J. Irvine			
		Name of Person			
	FCO	ELITE INDUSTRIES LLC			
		Firm/Company			
	657	4 N. State Road 7 #112			
		Address		20 TA	
	Co	oconut Creek FL 33073		2011 OCT 25 SECRETARY	
City/State and Zip Code				CT 25 AI ETARY OF HASSEE,	
	thomasirvine@aol.com E-mail address: (to be used for future annual report notification)				
For further information	concerning this matter, please of	-	,	AM 8: 26 OF STATE E.FLORID	
	omas J. Irvine	ai (9-1685	26 DA	
Name	of Person	Area Code & Daytime To	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)	Certified C	of Status &	
	LING ADDRESS:	STREET/COURIER Registration Section	ADDRESS:		

Registration Section Division of Corporations 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

ECO ELITE IND	USTRIES LL	.C			
(Name of the Limited Liability Compa (A Florida Limited I	<u>ny as it now appea:</u> Liability Company)	rs on our records.)			
The Articles of Organization for this Limited Liability Company	were filed on	01/06/2011	and assigned		
Florida document numberL11000002452					
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the limited liab	oility company her	<u>re</u> :			
The new name must be distinguishable and end with the words "Limi"L.L.C."	ited Liability Compa	any," the designation "!	LLC" or the abbreviation		
Enter new principal offices address, if applicable:	6574 N. State	e Road 7 #112	20 TA		
(Principal office address MUST BE A STREET ADDRESS)	Coconut Cre	ek, FL 33073	LCHET LOCT		
			A T		
Enter new mailing address, if applicable:	6574 N. State	e Road 7 #112	ECRETARY OF LAHASSEE. FI		
(Mailing address MAY BE A POST OFFICE BOX)	Coconut Cree	ek, FL 33073	8: 2 FLORII		
			26 IDA		
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her		our records, <u>enter</u>	the name of the new		
Name of New Registered Agent:					
New Registered Office Address:		iter Florida street add	hass		
	City	, Florida	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 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 **Type of Action Address Title** <u>Name</u> MGR Thomas J. Irvine 6574 N. State Road 7 #112 **✓** Add Remove Coconut Creek, FL 33073 Lisa A Niedermeyer MGR 102 NE 2nd Street PMB 171 ☐ Add Remove Boca Raton, FL 33432 ___ Add Remove \prod Add Remove □Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated Signature of a member or authorized representative of a member

Typed or printed name of signee

Page 2 of 2

Thomas J. Irvine

Filing Fee: \$25.00