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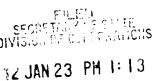
то:	Registration Se Division of Cor		•	•				
SUBJE	С Т•	ECA HO	OLDINGS, LLC					
30000	C1.		ted Liability Company					
The enc	The enclosed Articles of Amendment and fee(s) are submitted for filing.							
Please return all correspondence concerning this matter to the following:								
		Α	NDREAS SCHMOLL					
Name of Person								
			Firm/Company					
1129 SE 32ND TERRACE Address								
		CAPE	CORAL FLORIDA 33904					
	i projecti	c A ₁ ¹¹	City/State and Zip Code					
	i i i i i i i i i i i i i i i i i i i	GO	-TUBE@GO-TUBE.US to be used for future annual report notific	·····				
		,		ation)				
For furtl	ner information co	oncerning this matter, please c	all:					
	ANDRI	EAS SCHMOLL	40 /	24-8431				
	Name of	f Person	Area Code & Daytime	Telephone Number				
Enclose	d is a check for th	ne following amount:						
\$25.0	00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 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

ARTICLES OF AMENDMENT TO SECRETARY ARTICLES OF ORGANIZATION DIVISION OF



ECA HOLDINGS LLC

(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 Li Florida document numberL11000141	• • •	12/19/2011	and assigned	
This amendment is submitted to amend the follow. A. If amending name, enter the new name of	•	:		
The new name must be distinguishable and end wit "L.L.C." Enter new principal offices address, if application of the second of	able:	ny," the designation "L		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	- · · ·			
B. If amending the registered agent and/or registered agent and/or the new registered of		ır records, <u>enter tl</u>	ne name of the new	
Name of New Registered Agent:	<u></u>			
New Registered Office Address:				
	Enter Florida street address			
		, Florida	7: 0 !	
	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, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager

MGRM = Managing Member **Type of Action** Title Name <u>Address</u> **MGRM** AMCHE, LLC **914 NE 24TH LANE** | ✓ Add CAPE CORAL, FLORIDA 33909 Remove ANDREAS & CO., LLC MGRM **914 NE 24TH LANE** Add CAPE CORAL FLORIDA 33909 ☐ Renove Add Remove Remove □Add Remove Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) **JANUARY 20** 2012 Dated_ Signature of a member or authorized hepresentative of a member ANDREAS SCHMOLE Typed or printed name of gignee Page 2 of 2

Filing Fee: \$25.00