

L130000 63724

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

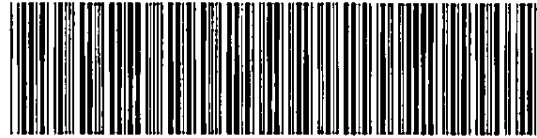
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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DIVISION OF

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OCT 27 2017

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: PANTRO ECHO, 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:

Patricia Bastidas

Name of Person

Firm/Company

3250 NE 188th St, Unit #702

Address

Aventura, FL 33180

City/State and Zip Code

p_bastidas@hotmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Patricia Bastidas

Name of Person

at (786)

Area Code

302-4856

Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Patricia Bastidas		<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
		3131 NE 188th St, Apt 2310; Aventura, FL 33180	<input checked="" type="checkbox"/> Change
MGRM	Leonardo Emperador		<input type="checkbox"/> Add
		3250 NE 188TH ST, UNIT #702 AVENTURA, FL 33180	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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2018

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

Handwritten lines for amending information.

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DIVISION

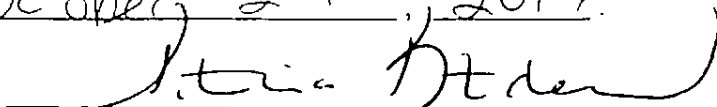
E. Effective date, if other than the date of filing: _____ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:
(b) The 90th day after the record is filed.

Dated October 24, 2017.



Signature of a member or authorized representative of a member

Patricia Bastidas

Typed or printed name of signee