Office Use Only



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JAN 23 9011 J. BROÜL

## **COVER LETTER**

SUBJECT: Flo	rida Eco En	terprises, LL ed Liability Company	C		
	Name of Limit	ed Liability Company			
The enclosed Articles of A	Amendment and fee(s) are subm	nitted for filing.			
Please return all correspon	dence concerning this matter t	o the following:			
	Greg t	lendricks Name of Person			
	Florida E	Firm/Company	, LLC		
	1685 Ne	ptune Drive			
	merri#I	sland, Florida City/State and Zip Code h@gmail.com	32952		
	gatorgreg	h@gmail.com be used for future annual report notificat	[2]	2014 J	
For further information co	ncerning this matter, please ca	·	ेंद्र अ १	OTH JAN 21	Contract.
Greg He	endricks	at (352) 339 - 1 Area Code Daytime Te	148		
/ Name of	Person	Area Code Daynine Te	repriorie Nutriber	PH 1:38	D 1
Enclosed is a check for the	e 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 Sta Certified Copy (additional copy is e	atus &	

MAILING ADDRESS:

TO:

Registration Section Division of Corporations

> 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 ARTICLES OF ORGANIZATION OF

Florida Eco Enterprites, 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 Liability Company were filed on $12/20/201$ . Florida document number $13000176348$	3 and assigned	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liability company here:		
Florida Eco Enterprises LLC  The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or		_
The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or	www 85.55	
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)	74 H	
	200	Terroman. Springer
	35.	
Enter new mailing address, if applicable:	77.77	
(Mailing address MAY BE A POST OFFICE BOX)	95 -	12.4
Intuing unaress harr be A rost of ree boxy	<u> </u>	_
		_
B. If amending the registered agent and/or registered office address on our records, enregistered agent and/or the new registered office address here:	ter the name of the	new
Name of New Registered Agent:		_
New Registered Office Address:		
Enter Florida street address		_
, Florida	1	
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 605, 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 Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member-being added or removed from our records:

MGR = Manager

AMBR = A	AMBR = Authorized Member			
<u>Title</u>	Name	Address	Type of Action	
			□ Add	
			☐ Remove	
<del></del>			D Add	
			☐ Remove	
•			Rembore	
		<del></del>	SSEM Remove	
		**************************************	To Remove	
	,	**************************************		
		<del></del>	Remove	
			☐ Add	
			□ Remove	

). If amen	iding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
	· ·
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_	
(The effect	e date, if other than the date of filing:  (optional)  ive date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after his document is filed by the Florida Department of State)
	January 16th 2014
	Cy Henchils
	Signature of a member or authorized representative of a member
	Grey Hendricks
	Typed or printed name of signee

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Filing Fee: \$25.00

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