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COVER LETTER

TO: Registration S Division of Co						
EAST C	LEVELAND INVESTM	ENTS LLC				
SUBJECT.	Name of Lin	mited Liability Company				
The enclosed Articles of	Amendment and fee(s) are su	bmitted for filing.				
Please return all correspo	ondence concerning this matter	r to the following:				
	GARY WALCZAK					
		Name of Person				
	East Cleve	cloud Investments	LLC			
		Firm/Company				
	436 12TH ST W SI	JIT B				
		Address	<u> </u>			
	BRADENTON FL 3	4205		至的	귥	
		City/State and Zip Code			15 JAN	
	JOEBENNETT1979	_		(2) (2)	2	**************************************
		to be used for future annual report notifi	cation)	řije.	Ž	
For further information co	oncerning this matter, please c	all:		EC.	Α̈́O TOTE	
GARY WALCZAK		941 448-4613			: 25	
Name of	f Person		Telephone Number	· in		
Enclosed is a check for th	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 Fili Certificate Certified ((additional e	e of Status Copy		

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 ARTICLES OF ORGANIZATION OF

EAST CLEVELAND INVE		LC				
(Name of the Lim	(A Florida Limited	any as it now appears o Liability Company)	n our records.)			
The Articles of Organization for this Limited I Florida document number L14000007588	Liability Company	were filed on 01-1	4-2014	and as	signed	
This amendment is submitted to amend the fol	lowing:					
A. If amending name, enter the new name of	of the limited liah	oility company here	:			
The new name must be distinguishable and end with the	words "Limited Lial	pility Company," the des	ignation "LLC" or the a	abbreviation "]	L.L.C."	
Enter new principal offices address, if appli	cable:	GARY WALCZ	ZAK			
(Principal office address MUST BE A STREE	ET ADDRESS)	436 12TH ST	W SUIT B			
	·	BRADENTON	FL 34205	100	(-	
Enter new mailing address, if applicable:		436 12TH ST	W SUIT B	65 (5) (5) (5)	23 D	7.5
(Mailing address MAY BE A POST OFFICE	BOX)			n''	豊心	`-
				<u> </u>	9: 2 5	
B. If amending the registered agent and registered agent and/or the new registered o			ır records, <u>enter</u>	the name	of the ne	<u>w</u>
Name of New Registered Agent:	GARY WAL	CZAK				
New Registered Office Address:	436 12TH S	ST W SUIT B				
		Enter Florida	street address			
	BRADENTO		, Florida <u>34</u>	205		
		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 = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MM	GARY WALCZAK	436 12TH ST W SUIT B	Add
		BRADENTON FL 34205	☐ Remove
P	NICHOLAS PHIPPS	124007 Upper Manatee River Road	
		BRADENTON FL 34212	Remove
			□ Add
			Remove
			15 JAN 23
			Remove (
			□ Add
			Remove
			☐ Remove

Effective date, if other than the da (The effective date must be specific, cannot be the date this document is filed by the Floric	be prior to date of receipt or filed date and cant	(optional) not be more than 90 days after
(The effective date must be specific, cannot be	be prior to date of receipt or filed date and cann	(optional) not be more than 90 days after
(The effective date must be specific, cannot be the date this document is filed by the Floridal IANI IARY 5	be prior to date of receipt or filed date and cant la Department of State)	(optional) not be more than 90 days after
Dated JANUARY 5	be prior to date of receipt or filed date and cant la Department of State)	not be more than 90 days after

Page 3 of 3

Filing Fee: \$25.00

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