

L14000019032

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

(Document Number)

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**COVER LETTER**

TO: Registration Section  
Division of Corporations

SUBJECT: EC NATURE 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:

IRENA ORLOV  
Name of Person

EC NATURE LLC  
Firm/Company

200 Riverfront Dr, Unit D 201  
Address

Palm Coast, FL 32137  
City/State and Zip Code

irastar66@gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

X IRENA ORLOV at ( 386 ) 793-1425  
Name of Person Area Code Daytime Telephone 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)      ☐ \$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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

September 14, 2015

IRENE ORLOV  
200 RIVERFRONT DRIVE  
UNIT D201  
PALM COAST, FL 32137

SUBJECT: ECNATURE LLC  
Ref. Number: L14000019032

We have received your document for ECNATURE LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Missing page (3) of the amendment form with the signature. Please note I am enclosing page (3) only.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Neysa Culligan  
Regulatory Specialist II

Letter Number: 515A00019353

ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF

FILED

2015 OCT -1 AM 8:45

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

ECNATURE 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 \_\_\_\_\_ and assigned  
Florida document number L14000019032

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

X 2987 Bellvue Ave  
Daytona Beach, FL  
32124

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

200 Riverfront Dr  
Unit D 201  
Palm Coast, FL 32137

**B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:**

Name of New Registered Agent:

IRINA ORLOV

New Registered Office Address:

200 RIVERFRONT DR, D302

Enter Florida street address

PALM COAST, Florida 32137

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 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>
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MGR	Alexander Vorobyov	200 Riverfront Dr D 201 Palm Coast, FL 32137	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
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☐ Change

MGR	IRINA ORLOV	200 Riverfront Dr Unit D-201, Palm Coast FL 32137	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
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☐ Change

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

[illegible]

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TALLAHASSEE, FLORIDA

**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 9-20-75

*[Handwritten signature]*

Signature of a member or authorized representative of a member

IRINA Orlov

Typed or printed name of signee