Florida Department of State

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To:

Division of Corporations

: (850)617-6383

From:

Account Name : FOX ROTHSCHILD LLP

Phone

Account Number : I20130000024 : (215)299-2162

Fax Number

: (215)299-2150

**Enter the email address for this business entity to be used for future. annual report mailings. Enter only one email address please. **

Email Address: vlagana@foxrothschild.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN ECOCARSA MANAGEMENT LLC

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COVER LETTER

TO: Registration Sec Division of Corp		and the second s	and the second of the second o	
OVID IN CO.	ECOCARSA N	IANAGEMENT LLC		
SUBJECT:	Name of Lin	ited Liability Company		
The enclosed Articles of A	amendment and fee(s) are sub	mitted for filing.		
Please return all correspon	dence concerning this matter	to the following:		
	VANESSA LAGANA, CO	ORPORATE PARALEGAL		
		Name of Person	n	** ** _{***}
	FOX ROTHSCHILD LLP			
		Firm/Company		
	ONE BISCAYNE TOWE	R, 2 S. BISCAYNE BLVD., SU	ITE 2750	
		Address		
No	MIAMI, FLORIDA 3313	l		· · · · · · · · · · · · · · · ·
		City/State and Zip Code		***
	VLAGANA@FOXROTHS			
	E-mail address: (to be used for future annual report r	notification)	
For further information co	ncerning this matter, please o	all:		
VANESSA LAGANA		305 442-6544	•	
Name of	Person	Area Code Day	time 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)	☐ S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclose	

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

Fax Audit #2015000126436 & 00

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ECOCARSA MANAGEMENT LLC

AMENDMENT SECRETARY OF STATES
O TALLAHASSEE, FLORIDA
DRGANIZATION

V	A Florida Limited I.	av as it naw appears on our re imbility Company)	cords.)		
The Articles of Organization for this Limited Lia Florida document number L15000066202	bility Company	were filed on APRIL 15, 2	and assigned		
This amendment is submitted to amend the follow	ving:				
A. If amending name, enter the new pame of	the limited liabi	lity company here:			
The new name must be distinguishable and contain the wor	ds "Limited Liabili	ty Company," the designation "	LLC" or the abbreviation "L L C."		
Enter new principal offices address, if applical	bie:	C/O ONE BISCAYNE TO	WER		
(Principal office address MUST BE A STREET	ADDRESS)	2 S. BISCAYNE BLVD.,)., SUTTE 2750		
		MIAMI, FLORIDA 33131			
Enter new mailing address, if applicable:	,	C/O ONE BISCAYNE IC	WER		
(Mailing address MAY BE A POST OFFICE B	2 S. BISCAYNE BLVD		,SUIJE 2750		
	74.1. 74	MIAMI, FLORIDA 33131			
	ingligitet co. Oth	ice addiess on our lect	ords, enter the name of the new		
registered agent and/or the new registered office Name of New Registered Agent:	ce address here	NG SERVICES, LTD.	ords, enter the name of the new		
registered agent and/or the new registered offi	ce address here	NG SERVICES, LTD.	ords, enter the name of the new		
registered agent and/or the new registered offi	ce address here	NG SERVICES, LTD.			
registered agent and/or the new registered offi	ce address here	: ING SERVICES, LTD Y DR Enter Florida street aa			
Name of New Registered Agent: New Registered Office Address:	INCORPORATI 1540 GLENWA TALLAHASSEI	: ING SERVICES, LTD Y DR Enter Florida street aa	dress 22201		
registered agent and/or the new registered offi	INCORPORATI 1540 GLENWA TALLAHASSEI gistered Agent; agent and agree and complete pered agent as pr gistered office a lange.	NG SERVICES, LTD Y DR Enter Florida street and City to act in this capacity interformance of my duties revided for in Chapter 60	The state of the limited liability Secretary Jeness Jeness		

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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

Title	<u>Name</u>	Address	Type of Action
MGR	EFRAIN CARRERA	C/O ONE BISCAYNE TOWER	
		2 S. Biscayne Blvd., Suite 2750	□ Remove
	• •	Miami, Florida 33131	☐ Change
MGR	MARIA CARRERA	C/O ONE BISCAYNE TOWER	Add
		2 S. Biscayne Blvd., Suite 2750	□ Remove
		Miami, Florida 33131	☐ Change
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ated JULY 17	1 A.	2015				
	Signature of a men	mber or authorized	representative of a	member		-
1						

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