## 15000187642

| (Re                     | equestor's Name)   |           |
|-------------------------|--------------------|-----------|
| (Ad                     | ldress)            | ····      |
| (Ad                     | dress)             |           |
| (Cit                    | ty/State/Zip/Phone | e #)      |
| PICK-UP                 | ☐ WAIT             | MAIL      |
| (Bu                     | siness Entity Nan  | ne)       |
| (Do                     | ocument Number)    |           |
| Certified Copies        | _ Certificates     | of Status |
| Special Instructions to | Filing Officer:    |           |
|                         |                    |           |
|                         |                    |           |
|                         |                    |           |

Office Use Only



900293157039

12/15/16--01003--031 \*\*25.00

DEC 1 6 2016 S. YOUNG

16 DEC 15 PH 4: 1.

SCORETARY OF STATE

## **COVER LETTER**

| TO:      | Registration So<br>Division of Co |  |  |   |  |
|----------|-----------------------------------|--|--|---|--|
| SUBJE    | FALL ECC                          | DLLC   |  |   |  |
| SUBJE    | .cr:                              | Name of Lin  | nited Liability Company  | <del> </del>  |  |
| The end  | closed Articles of                | Amendment and fee(s) are sub   | omitted for filing.  |   |  |
|          |                                   | ondence concerning this matter   | _  |   |  |
|          |                                   | Daniel A Thompson  |  |   |  |
|          |                                   |  | Name of Person   |   |  |
|          |                                   | FALL ECO LLC   |  |   |  |
|          |                                   |  | Firm/Company   | <del></del>   |  |
|          |                                   | 145 SW 13TH ST # 717   |  |   | 35 D   |
|          |                                   |  | Address  | <del></del>   | DEC DEC  |
|          |                                   | Miami, FL 33130  |  |   | <u>5</u> 5 5 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 |
|          |                                   | cabilluos@gmail.com  | City/State and Zip Code  |   | PM 4: 17                                       |
|          |                                   | E-mail address: (  | to be used for future annual report notif  | ication)  | 7  |
| For furt | her information c                 | oncerning this matter, please c  | all:   |   |  |
| Daniel   | A Thompson                        |  | 786 202-2237   |   |  |
|          | Name o                            | of Person  |  | Telephone Number  | _  |
| Enclose  | ed is a check for t               | he 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 F<br>Certificate of S<br>Certified Copy<br>(additional copy is | Status &                                       |
|          | Registr<br>Divisio<br>P.O. Bo     | ING ADDRESS:<br>ration Section<br>on of Corporations<br>ox 6327<br>assee, FL 32314 | STREET/COURII Registration Section Division of Corpora Clifton Building 2661 Executive Cer | n<br>ations   |  |

2661 Executive Center Circle Tallahassee, FL 32301

## ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION **OF**

| (Name of the Limited)  | <b>Liability Compa</b><br>Florida Limited | ny as it now appears on our records.<br>Liability Company) |                          |
|--|---|--|--------------------------|
| The Articles of Organization for this Limited Liab   | ility Company                             | were filed on 11/05/2015                                   | and assigned             |
| This amendment is submitted to amend the following   | ing:                                      |  |                          |
| a. If amending name, enter the new name of th  | e limited liab                            | ility company here:  |                          |
| he new name must be distinguishable and contain the word                                   | s "Limited Liabi                          | lity Company," the designation "LLC"                       | or the abbreviation L.C. |
| nter new principal offices address, if applicabl   | le:                                       | 145 SW 13 TH ST  | 日記                       |
| Principal office address MUST BE A STREET  |   | # 717  |                          |
|  | <del></del>                               | MIAMI, FL 33130  | 70                       |
| nter new mailing address, if applicable:   |   | 145 SW 13 TH ST  | 1 Less                   |
| Mailing address MAY BE A POST OFFICE BO  | <u>)X)</u>                                | # 717  |                          |
|  |   | MIAMI, FL 33130  |                          |
| . If amending the registered agent and/or egistered agent and/or the new registered office | e address her                             | ffice address on our records,<br>e:                        | enter the name of the    |
|  | Thompson Dan                              |  |                          |
| Name of New Registered Agent:  | Thompson Dan                              | lei A  |                          |
| Name of New Registered Agent.  | Thompson Dan<br>145 SW 13 TH              | ST   |                          |
| Name of New Registered Agent.  |   |  |                          |

FALL ECO LLC

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

Page 1 of 3

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>                          | Type of Action |
|--------------|------------------|---|----------------|
| AMBR         | Osleydi Thompson | 145 SW 13 TH ST                         | ■ Add          |
|              |                  | # 717                                   | ☐ Remove       |
|              |                  | MIAMI, FL 33130                         | Change         |
|              |                  |   | Add            |
|              |                  |   | □ Remove       |
|              |                  |   | □ And □        |
|              |                  | *************************************** | Rempve         |
|              |                  |   | ☐ Change       |
|              |                  |   | Add            |
|              |                  |   | ☐ Remove       |
|              |                  |   | Change         |
|              |                  | <del></del>                             | Add            |
|              |                  | <del></del>                             | Remove         |
|              |                  |   | ☐ Change       |
| <del></del>  | <del></del>      |   | □ Add          |
|              |                  |   | ☐ Remove       |
|              |                  |   | ☐ Change       |

| Ownership Interest set a  | s follows:  |
|---|---|
| DANIEL A THOMPSO  | N 50 % ownership interest.  |
| OSLEYDI THOMPSOI  | N 50 % ownership interest.  |
|   |   |
|   |   |
|   |   |
|   |   |
|   |   |
|   |   |
|   | ক<br>   |
|   | 問<br>   |
|   | S. C.   |
|   |   |
| emand laws in the   |   |
|   |   |
|   |   |
|   |   |
| effective date is listed, the date  :: If the date inserted in th | the date of filing:   |
| ecord specifies a dela<br>e 90th day after the                    | ayed effective date, but not an effective time, at 12:01 a.m. on the ear record is filed. |
| December, 5   | 2016  |
|   | A. Am   |
|   | Signature of a member or authorized representative of a member                            |

Page 3 of 3

Filing Fee: \$25.00