31 2020 17:30 HP Fax	page 1
1/2020	Division of Corporations Division of Corporations Division of Corporations Electronic Filing Cover Sheet
Note: Please pl (show	rint this page and use it as a cover sheet. Type the fax audit number n below) on the top and bottom of all pages of the document.
	(((H20000254627 3)))
	H200002546273ABC
Note: DO NOT	I hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.
Fa From: Ac Ph	vision of Corporations x Number : (850)617-6383 count Name : FASTKIT CORP count Number : I20100000009 one : (305)599-0839 x Number : (305)592-9591
annual Constantia Cons	email address for this business entity to be used for future report mailings. Enter only one email address please.**
	AMND/RESTATE/CORRECT OR M/MG RESIGNECUADOR HIGH YIELD BOND FUND, LLCCertificate of Status0Certified Copy0Page Count03Estimated Charge\$25.00
1	AUG 0 3 2020

ປປເປັນ	2020	17:30	nr	rax
--------	------	-------	----	-----

t---

·^	
ARTICLES OF AMENDMENT	
то	122
ARTICLES OF ORGANIZATION	,
OF	· · · · · · · · ·
Ecuador High Yield Bond Fund, LLC	<u>_</u>
(Name of the Limited Lipblity 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 01/22/2016	and assigned
FlorIda document number 116000015886	
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)	
	· · · · · · · · · · · · · · · · · · ·
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
(Mainny audress WAT MANY OCCUPTION	
B. If amending the registered agent and/or registered office address on our records, enter the n	ame of the new regin
ngent and/or the new registered office address here:	
Name of New Registered Agent:	<u> </u>
New Registered Office Address: Enter Florida street address	
, Florida	
('iŋ	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 wi provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with an accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document 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 address or removed from our records:

## MGR = Manager

AMBR = Authorized Member

Title	<u>Name</u>	Address	Type of Action
AMBR, MGR	lorge Cherrez	1221 Brickell Avenue	🗋 Add
		Suite 900	ERemove
		Miami, FL 33131	[]Change
MGR	Argonaut FL, LI.C	1221 Brickell Avenue	🖬 Add
		Suite 900	Remove
		Miami, FL 33131	Change
			🗆 Adć
			Change
			□ Add
			Петоче
			[] Add
			[]Remove
			Change
. <u></u>			🗆 Add
			CRemove

Jul 31 2020 17:30 HP Fax

i

pa	ge	4	

	Page 2 of 3
amending any o	other information, enter change(s) here: (Attach additional sheets, if necessary.)
<u> </u>	
<u> </u>	
. <u></u>	
···	
at	
<b></b>	
<u> </u>	
<u>-</u>	
Mective date, if	other than the date of filing:(optional) listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to
iote: lf the date in	inside, the data must be specific and connect of prior to be statutory filing requirements, this date will not be ive date on the Department of State's records.
ocminent s'enecu-	ve date on the Department of State's records.
e record speci	fies a delayed effective date, but not an effective time, at 12:01 a.m. on the e
The 90th day	after the record is filed.
	1 10-2- // .
ated	$-07/30/\omega \omega $
	Signature of a member or authorized employing the py a member
	1.7 /
	Typed or printed ning of signer / Life hts 5