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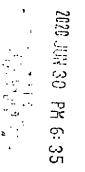
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AUG 13 2020 S. YOUNG

COVER LETTER

TO: Registration Division of C	Section Corporations			
	ECHEA, LLC			
SUBJECT: Name of Limited Liability Company				
The enclosed Articles	of Amendment and fee(s) are sub	emitted for filing.		
Please return all corre	spondence concerning this matter	to the following:		
	Al	NDREINA V GOICOECHEA		
	Name of Person			
	GOICOECHEA, LLC			
	Firm/Company			
	3038 RED MANGROVE LANE SOUTH			
		Address		
	FOR	T LAUDERDALE, FL 33312		
		City/State and Zip Code		
		nagoicoechea13@gmail.com		
	E-mail address:	to be used for future annual report notification)		
For further informatio	n concerning this matter, please of	all:		
ANDREINA V GOIC	OECHEA	786 683-3005		
Nan	e of Person	Area Code Daytime Teleph	one Number	
Enclosed is a check for	or the following amount:			
□ \$25.00 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$60.00 Filing Fee, Certificate of Status & Certified Copy tadditional copy is enclosed)	
P.O. Box 6	n Section f Corporations	Street Address: Registration Section Division of Corporatio The Centre of Tallaha 2415 N. Monroe Stree Tallahassee, FL 32303	ssee et, Suite 810	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2

GOICOECHE	A, LLC
(<u>Name of the Limited Liability Compa</u> (A Florida Limited 1	ny as it now appears on our records.) iability Company)
The Articles of Organization for this Limited Liability Company Florida document number L17000030043	
This amendment is submitted to amend the following:	ັກ
A. If amending name, enter the new name of the limited liab	ility company here:
N/A	
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	13441 SW 182nd STREET
(Principal office address MUST BE A STREET ADDRESS)	MIAMI, FL 33177
Enter new mailing address, if applicable:	13441 SW 182nd STREET
(Mailing address MAY BE A POST OFFICE BOX)	MIAMI, FL 33177
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	ddress on our records, enter the name of the new registered
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
	, Florida
	City Zin 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 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	XIOMARA GOICOECHEA	1913 RIVERSIDE DRIVE, APT 2	□Add
		FORT LAUDERDALE, FL 33312	≡ Remove
			□Change
AMBR	JANET MONDEJAR	13441 SW 182ND STREET	■Add
		MIAMI, FL 33177	□Remove
			□Change
			□Add
			□Remove
			DChange
			□ Add
			□Remove
			□ Change
			🗀 Add
			□Remove
			□Change
			□Add
			□Remove
			□Change

N/A	
-	
Effective date, if other th	an the date of filing: (optional)
(If an effective date is listed, the Note: If the date inserted in	date must be specific and cannot be prior to date of tiling or more than 90 days after filing.) Pursuant to 605.0207 (a this block does not meet the applicable statutory filing requirements, this date will not be listed as to the Department of State's records.
ne record specifies a delayed ord is filed.	effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
JUNE 23	2020
Dated	··
A670100	echia
-d-/	Signature of a member or authorized representative of a member
	ANDREINA V GOICOECHEA
	Typed or printed name of signee

Filing Fee: \$25.00