1/7000/12/88

(Re	equestor's Name)	
(Ac	ldress)	
(Ac	idress)	
(Ci	ty/State/Zip/Phone	#)
PICK-UP	WAIT	MAIL
. (Bu	usiness Entity Name	<u> </u>
(Dx	ocument Number)	
Certified Copies	Certificates of	of Status
Special Instructions to	Filing Officer:	

Office Use Only



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J. HARRIE

COVER LETTER

	Registration S Division of Co					
end in		Echo 2703 LLC				
SUBJEC	.1:	Name of Lim	nited Liability Company			
The enclo	osed Articles of	f Amendment and fee(s) are sub	omitted for filing.			
Please ret	turn all corresp	ondence concerning this matter	to the following:			
		Christopher J. Klein				
			Name of Person			
		Baur & Klein, P.A.				
			Firm/Company			
		100 N. Biscayne Blvd., 21st Floor				
			Address			
		Miami/FL 33132				
			City/State and Zip Code			
		cklein@worldwidelaw.com				
For furthe	er information (e-mail address: (to be used for future annual report notif all:	neation)		
Christopl	her J. Klein		305 377-3561			
	Name (of Person		: Telephone Number		
Enclosed	is a check for t	the following amount:				
\$25.0	0 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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Carsmith Echo 2703 LLC		
(<u>Name of the Limited Liability Comp</u> (A Florida Limited	pany as it now appears on our recor I Liability Company)	'ds.)
The Articles of Organization for this Limited Liability Compan	y were filed on 05/22/2017	and assigned
Florida document number L17000112188		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lia	bility company here:	
The new name must be distinguishable and contain the words "Limited Liab	pility Company," the designation "LL	C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		22
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
		5: =
		ζ. σ
B. If amending the registered agent and/or registered or registered agent and/or the new registered office address he		is, enter the name of the ne
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street addre	PSS
	c	lorida
	, r	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>	Name	<u>Address</u>	Type of Action
MGR	Mario A. Cardenas	1441 Brickell Ave.	Add
		Suite 1700	Remove
		Miami, FL 33131	■ Change
MGR	Gazali A. Smith	1441 Brickell Ave.	Add
		Suite 1700	
		Miami, FL 33131	■ Change
			□ Remove
			Change
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ective date, if other than neffective date is listed, the date te: If the date inserted in this ument's effective date on the record specifies a delative 90th day after the	is block does not be Department of yed effective	t meet the applic f State's records date, but no	able statutory fil	ing requirem	ents, this date	will not	be listed a
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July 5		2017					
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ted July 5	Signature of	a member or auth	orized tepresentations by the secondary of the secondary of signee	Klom,		IAILAHASSEE EI	2017 JUL 27 AM 11:

Filing Fee: \$25.00