<u> 1180xx)242547</u>

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		stration Sect sion of Corp			
CUBIEC		Ecotiere, LLO			
SUBJEC	.l; .			ited Liability Company	
The enclo	osed	Articles of A	mendment and fee(s) are sub-	mitted for filing.	
Please re	turn	all correspon	dence concerning this matter	to the following:	
			Frederick Bohler		
				Name of Person	A
			702 //	Firm/Company	
			702 Kenmoore Ct		
			Eustis, FL 32726	Address	
			bohler.fred9@gmail.com	City/State and Zip Code	
			E-mail address: (to be used for future annual report noti	fication)
For furth	er in	formation cor	ncerning this matter, please ca	all:	
	<u>F,</u>	Name of I	Bohke- Person	at (<u>}552</u>) <u>455-8</u> Area Code Daytim	e Telephone Number
Enclosed	lisa	check for the	following amount:		
\$25.0	00 Fi	ling 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:

TO:

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

TO ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

2018 DEC -6 PM 2:38

Ecotiere, LLC

SECRETARY OF STATE TALLAHASSEE, FI

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

10/15/2019

The Articles of Organization for this Limited I	iability Company	were filed on 10/15/2010	and assigned	
Florida document number L18000242547				
This amendment is submitted to amend the fol	lowing:			
A. If amending name, enter the new name	of the limited liah	oility company here:		
Eco Tiere, LLC				
The new name must be distinguishable and contain the	words "Limited Liabi	lity Company," the designation	n "LLC" or the abbreviation "L.L.C."	
Enter new principal offices address, if appli	cable:	702 Kenmoore Ct		
(Principal office address MUST BE A STRE		Eustis, FL 32726		
Enter new mailing address, if applicable:		702 Kenmoore Ct		
(Mailing address MAY BE A POST OFFICE	BOX)	Eustis, FL 32726		
B. If amending the registered agent and registered agent and/or the new registered of			ecords, enter the name of the new	
Name of New Registered Agent:	Frederick Bohl	er		
New Registered Office Address:	702 Kenmoore	Ct		
		Enter Florida stree	address	
	Eustis		Florida ³²⁷²⁶	
		City	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	Address	Type of Action
MGR	Frederick Bohler	702 Kenmoore Ct Eustis, FL 32726	
			☐ Remove
			□ Change
			Add
			☐ Remove
			Change
			□ Add
			□ Remove
			Add
			□ Remove
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	1'	2/3/2018			<u> </u>
fective date, if other than the an effective date is listed, the date munitie: If the date inserted in this blumment's effective date on the D	date of filing:st be specific and can ock does not meet	not be prior to date the applicable s	of filing or more that tatutory filing requ	(optional) n 90 days after filing.) Purs rements, this date will r	uant to 605.0207 not be listed as
record specifies a delayed The 90th day after the rec		, but not an	effective time,	at 12:01 a.m. on t	he earlier of
12/3 ted	20	018			
	1/2/	111			
	1. Mills		representative of a me		
	Signature of a memi	her or authorized	representative of a mo	יאלותי	

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Filing Fee: \$25.00