# L19000061 254

(Re	equestor's Name)	
(Ac	ldress)	
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(Cit	ty/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	e)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
4085		

Office Use Only



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SEP 12 2019 S. YOUNG



#### FLORIDA DEPARTMENT OF STATE Division of Corporations

August 7, 2019

SANDRA M WOOD NINJA ECHO LLC PO BOX 666 ST PETERSBURG, FL 33731

SUBJECT: NINJA ECHO LLC Ref. Number: L19000061254

We have received your document for NINJA ECHO LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a CORPORATION, but your entity is a LLC. Please complete and return the enclosed blank form(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Shelia H Young Regulatory Specialist II

2019 SEP 12 AH 10:

Letter Number: 719A00016192

## COVER LETTER

Division of Corp	orations		
SUBJECT:	NINJA E	CHO LLC	
	Name of Lim	ited Liability Company	
The enclosed Articles of A	mendment and fee(s) are sub	mitted for filing.	
Please return all correspon	dence concerning this matter	to the following:	
	SA	NORA WOOD  Name of Person	
		Name of Person	<del></del>
	NIN	JA ECHOLLC Firm'Company	
		Firm/Company	
		PO BOX 666	
		Address	
	<u>G</u> T	PETERSBURG FL City/State and Zip Code	33731
	N(N.JA E-mail address: (	ECHUE @ GMAIL.	COV\ cation)
For further information co	ncerning this matter, please ea		
SANDRA	WOOD	at ( <u>7</u> 27 <u>560 - 0</u> Area Code Daytime	339
Name of	Person	Area Code Daytime	Telephone Number
Enclosed is a check for the	following amount:		
S25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee &	☐ \$60.00 Filing Fee,
Pag.	Ceruncate of Status	Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy (additional copy is enclosed)

#### MAILING ADDRESS:

TO:

Registration Section

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

ECHO LLC	
Company as it now appears on our record inited Liability Company)	<u>ls.</u> )
npany were filed on 3/4 [19]	and assigned
d liability company here:	
d Liability Company," the designation "LLC	" or the abbreviation "L.L.C."
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	<u>₹</u>
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red office address on our record ss here:	s, enter the name of the n
<del></del>	
76	
Enter Florida street addres	55
	o <b>rida</b> Zw Code
	Dompany as it now appears on our record mited Liability Company)  appany were filed on 3/4 [4]  d liability company here:  I Liability Company," the designation "LLQ  SS)  Ted office address on our record as here:  Enter Florida street address.

#### 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>	Address	Type of Action
<u>ambr</u>	SANDRA M. WOOD	1511 ALCAZAR WAYS.	🗆 Add
		ST. PETERSBURG, FL 33705	Remove
			Change
			O Add
			□ Remove
			🗆 Change
			D Add
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. If amendi	ng any other information, enter change(s) here: (Attach additional sheets, if necessary.)
<del></del>	
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-	
If an effective Note: If the	late, if other than the date of filing:
he record The 901	specifies a delayed effective date, but not an effective time, at $12:01~a.m.$ on the earlier of h day after the record is filed.
Dated	september 10, 2019.
	September 10, 2019.  Signature of a member or authorized representative of a member
	SANDRA M. WOOD  Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00