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TECHNOLITY TO THE

COVER LETTER

	ision of Corp			
SUBJECT:	ECO-BAB)	'LLC		
SOBJECT.		Name of Lim	ited Liability Company	
The enclosed	1 Articles of a	Amendment and fee(s) are sub-	mitted for filing.	
Please return	all correspo	ndence concerning this matter	to the following:	
		Kismet Rollins		
		Online Best Inc.	Name of Person	
		1	Firm/Company	
		9821 E Bay Harbor Drive A	Apt 402	
		Bay Harbor Islands FL 331	Address 54	
For further in	nformation ce	myonlinebest@gmail.com E-mail address: (i	City/State and Zip Code to be used for future annual report not	titication)
Kismet Roll			407 2880065	
			at ()	
	Name of	Person	Area Code Daytir	ne Telephone Number
Enclosed is a	i check for th	e following amount:		
■ \$25.00 F	Filing Fee	S30.00 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)
	Registra Division P.O. Bo	NG ADDRESS: ntion Section n of Corporations ox 6327 ssee. FL 32314	STREET/COUR Registration Secti Division of Corpo Clifton Building 2661 Executive C Tallahassee, FL 3	orations Center Circle

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ECO-BABY LLC			
(Name of the Limite	d Liability Company A Florida Limited Liab	as it now appears on our rollity Company)	ecords.)
The Articles of Organization for this Limited Lia Florida document number L 19000093008	ability Company we	ere filed on	and assigned
This amendment is submitted to amend the follo	wing:		
A. If amending name, enter the new name of	the limited liabilit	v company here:	
The new name must be distinguishable and contain the wo	rds "Limited Liability	Company," the designation	"LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applica	ble:		TE S T
(Principal office address MUST BE A STREET	(ADDRESS)		N 2 1
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B B. If amending the registered agent and/or registered agent and/or the new registered offi	r registered office	e address on our rec	cords, enter the name of the name
Name of New Registered Agent:			
New Registered Office Address:	· · · · · · · · · · · · · · · · · · ·	Enter Florida street a	ddress
			179 - 4
		Cny	, Florida
New Registered Agent's Signature, if changing Re	gistered Agent:		•
I hereby accept the appointment as registered provisions of all statutes relative to the proper accept the obligations of my position as regist being filed to merely reflect a change in the re	and complete per ered agent as prov	formance of my dutic ided for in Chapter 6	s, and I am familiar with and 05. F.S. Or, if this document is

If Changing Registered Agent, Signature of New Registered Agent

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:

<u>Title</u>	<u>Name</u>	Address	Type of Action
	MARK Y ROLLINS	1015 E Sunrise Blvd Apt. 107	<u>, -, -</u> ,
MGR ———			
		Fort Lauderdale, FL 33304 US	
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ffective date, if other than the d an effective date is listed, the date must b	late of filing:	date of filing or more t	(optional)	Sugar to 605 03)07 (1
ote: If the date inserted in this blococument's effective date on the Dep	ck does not meet the applical	ble statutory filing red	quirements, this date wil	not be listed:	as th
e record specifies a delayed of The 90th day after the recor	effective date, but not rd is filed.	an effective time	e, at 12:01 a.m. on	the earlier	of:
November 18	2019				
	1/-)	<u>.</u> ·			
	ignature of a member or author	ized representative of a	member		
Kismet Rollins		•			
MONIEL NORTH	Typed or printed	name of signee	-		
<u> </u>					