L19000131537

(Re	equestor's Name)	
(Ad	ldress)	
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(Ad	ldress)	
(Cit	ty/State/Zip/Phone	: #)
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4/8/21



COVER LETTER

	Registration Se Division of Co			
CHID IEZ	ECUAPRO	D. LLC		
SUBJEC	.1;	Name of Lim	ited Liability Company	
The encl	osed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please re	eturn all correspo	ondence concerning this matter	to the following:	
		LUIS R. CALDERON		
			Name of Person	
		BELAIR ACCOUNTING	SERVICES, INC.	
			Firm/Company	
		1627 E. VINE STREET, S	SUITE 110	
			Address	
		KISSIMMEE, FL 34744		
			City/State and Zip Code	
		ADLUSH@AOL.COM	to be used for future annual report not	76
				meanon)
For Iurth	ier information c	concerning this matter, please c	all:	
LUIS R.	. CALDERON		407 944-9262 at ()	
	Name o	of Person	Area Code Daytin	ie Telephone Number
Enclosed	l is a check for t	he following amount:		
□ \$25.	00 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		<u>Street Address:</u> Registration Se	ection
	Division of C		Division of Co.	

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

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Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ECUAPRO, LLC		
(Name of the Limited Liability Compa (A Florida Limited I	iny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number <u>L19000131537</u> .	were filed on 05/15/2019	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicable:	1460) BRIGHTWELL CT	
(Principal office address MUST BE A STREET ADDRESS)	ORLANDO, FL 32824	
Enter new mailing address, if applicable:	14601 BRIGHTWELL CT	
(Mailing address MAY BE A POST OFFICE BOX)	ORLANDO, FL 32824	
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address:	address on our records, <u>enter the n</u>	ame of the new regis
New Registered Office Address.	Enter Florida street address	
	, Florida	Zip Code
	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 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	
AMRR =	Authorized	Membe

<u>Title</u>	<u>Name</u>	Address	Type of Action
		 	□Add
			□Remove
			□Add
			Remove
			□Change
			□Remove
			□Change
			□Add
			□Remove
			□Change
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ffective date, if other than to an effective date is listed, the date re lote: If the date inserted in this ocument's effective date on the	nust be specifi block does r	c and cannot be p not meet the ap	orior to date of tili oplicable statuto	ng or more than 9		
record specifies a delayed effect is filed.	tive date, but	t not an effecti	ve time, at 12:0	La.m. on the ea	rlier of: (b) The	e90th day after the
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Filing Fee: \$25.00



Department of State / Division of Corporations / Search Records / Search by Entity Name /

Detail by Entity Name

Florida Limited Liability Company

ECUAPRO LLC

Filing Information

Document Number

L19000131537

FEI/EIN Number

84-2061077

Date Filed

05/15/2019

Effective Date

05/15/2019

State

. . .

FL

Status

ACTIVE

Principal Address

3807 ENCHANTMENT LANE

SAINT CLOUD, FL 34772

14601 Brightwell CT Orlando, FL 32824

Changed: 04/30/2021

Mailing Address

1627 E. VINE STREET

SUITE 110

KISSIMMEE, FL 34744

Changed: 05/08/2020

Registered Agent Name & Address

PROANO OTANO, RENE J 14231 COLONIAL GRAND BLVD.

APT 2105

ORLANDO, FL 32837

Name Changed: 04/30/2021

Address Changed: 05/08/2020

<u>Authorized Person(s) Detail</u>

Name & Address

Title MGR

PROANO OTANO, RENE J 14231 COLONIAL GRAND BLVD. APT 2106

ORI ANDO FI 32837

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