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PICK-UP WAIT	MAIL
(Business Entity Name)	<u>_</u> _
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(Document Number)	
Certified Copies Certificates of Status	5
Special Instructions to Filing Officer:	





7/29/21

## **COVER LETTER**

ECH LLC		
Name of Lim	ited Liability Company	<del></del>
Amendment and fee(s) are sub	mitted for filing.	
ondence concerning this matter	to the following:	
GUSTAVO GOMEZ		
	Name of Person	
GBAGS TECH LLC	Name of Limited Liability Company  and fee(s) are submitted for filing.  Ining this matter to the following:  OGOMEZ  Name of Person  ECH LLC  Firm/Company  125TH ST  Address  L 33186  City/State and Zip Code  EZ2014@ICLOUD.COM  E-mail address: (to be used for future annual report notification)  matter, please call:  786  740-6402  at (	
	Firm/Company	
rticles of Amendment and fee(s) are submitted for filing.    Correspondence concerning this matter to the following:    GUSTAVO GOMEZ		
	Address	
MIAMI, FL 33186		
MILAGOMEZ2014@ICLO		
E-mail address: (i	to be used for future annual report notif	ication)
oncerning this matter, please ca	all:	
	786 740-6402	
f Person	at () Area Code Daytime	Telephone Number
ne following amount:		
	Certified Copy	Certificate of Status &
	Amendment and fee(s) are substituted and fee(s)	Amendment and fee(s) are submitted for filing.  Indence concerning this matter to the following:  GUSTAVO GOMEZ  Name of Person  GBAGS TECH LLC  Firm/Company  12556 SW 125TH ST  Address  MIAMI, FL 33186  City/State and Zip Code  MILAGOMEZ2014@ICLOUD.COM  E-mail address: (to be used for future annual report notification at the concerning this matter, please call:  786 740-6402  at (

TO:

Registration Section **Division of Corporations** 

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

Street Address: 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

GBAGS TECH LLC			
(Name of the Limited Lial (A Flo	bility Company as it now appears on our records.) rida Limited Liability Company)		
The Articles of Organization for this Limited Liability L20000248047  Florida document number	y Company were filed on	and assigned	
This amendment is submitted to amend the following			
A. If amending name, <u>enter the new name of the li</u>	imited liability company here:		
The new name must be distinguishable and contain the words "I	Limited Liability Company," the designation "LLC" of	or the abbreviation "L.L.C."	
Enter new principal offices address, if applicable:			
Principal office address MUST BE A STREET AD	DRESS)		
Enter new mailing address, if applicable:			
Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or registe agent and/or the new registered office address here		e name of the new registe	
Name of New Registered Agent:			
New Registered Office Address:	Enter Florida street address		
	rnier r ioriaa sireet aauress		
	, Flor	ida 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, <u>cnter the title</u>, <u>name</u>, <u>and address of each person being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	CRISTIAN E QUINTERO RAMIREZ	12556 SW 125TH ST MIAMI, FL 33186	
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ffective date, if oth	er than the date		18/2021		(ontions	h
an effective date is liste <b>Note:</b> If the date inselective (	rted in this block do	es not meet th	ie applicable sta	of filing or more tha tutory filing requ	n 90 days after fili irements, this da	l) ng.) Pursuant to 605.0207 te will not be listed as
ocument's enective t	date on the Departit	iem of State 5	records.			
record specifies a de	laved effective date.	but not an eff	ective time, at 1	2:01 a.m. on the	earlier of: (b)	The 90th'day after the
l is filed.	,					
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	Signat	ure of a membe	r or authorized re	presentative of a m	iember	
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