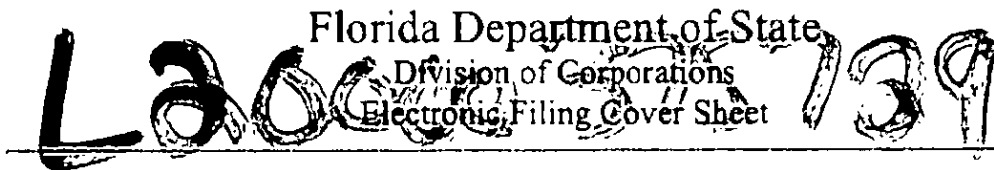


1/26/2021

Division of Corporations



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H21000035459 3)))



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To: Division of Corporations
Fax Number : (850)617-6383

From: Account Name : FASTKIT CORP
Account Number : I20100000009
Phone : (305)599-0839
Fax Number : (305)592-9591

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****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
E/CHINO SERVICES LLC**

| | |
|-----------------------|---------|
| Certificate of Status | 0 |
| Certified Copy | 0 |
| Page Count | 03 |
| Estimated Charge | \$25.00 |

JAN 27 2021

C Kinsey

Electronic Filing Menu

Corporate Filing Menu

Help

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

E/CHINO SERVICES LLC

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

The Articles of Organization for this Limited Liability Company were filed on 12/01/2020 and assigned
Florida document number L20000375729.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

ECHINO LLC

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

3223 SW 4TH ST

MIAMI FL 33135

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

CARMEN ALICIA MORALES

New Registered Office Address:

3223 SW 4TH ST

Enter Florida street address

MIAMI

City

Florida 33135

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.

Carmen Alicia Morales
If Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

MGRM = Managing Member

| <u>Title</u> | <u>Name</u> | <u>Address</u> | <u>Type of Action</u> |
|--------------|------------------|-------------------------|---|
| MGR | CARMEN A MORALES | 3223 SW 4TH ST | <input checked="" type="checkbox"/> Add |
| | | MIAMI FL 33135 | <input type="checkbox"/> Remove |
| | | <i>Carmen A Morales</i> | |
| MGR | ENER MORALES | 3223 SW 4TH ST | <input checked="" type="checkbox"/> Add |
| | | MIAMI FL 33135 | <input type="checkbox"/> Remove |
| | | <i>Enr Morales</i> | |
| | | | <input type="checkbox"/> Add |
| | | | <input type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Add |
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| | | | <input type="checkbox"/> Add |
| | | | <input type="checkbox"/> Remove |

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

Dated 01/25/2021

Carmen A. Morales *Em Morales*
Signature of a member or authorized representative of a member:

Carmen Alicia Morales
Typed or printed name of signer