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COVER LETTER

Division of Corporations					
	ECHOBEE, LLC				
SUBJECT: Name of Limited Liability Company					
The enclosed Articles of .	Amendment and fee(s) are sub	mitted for filing.			
Please return all correspo	ndence concerning this matter	to the following:			
	Stephen W. Screnci, Esq.				
		Name of Person			
	Stephen W. Screnci, P.A.				
		Firm/Company			
	2700 North Military Trail.	Suite 355			
		Address			
	Boca Raton, FL 33431				
	sws@screncilaw.com	City/State and Zip Code			
	•	to be used for future annual report notificat	ion)		
For further information co	oncerning this matter, please c	all:			
Stephen W. Screnci, Esq.		561 300-3390 at ()			
Name of	f Person	Area Code Daytime Te	lephone Number		
Enclosed is a check for th	ne following amount:				
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)		
Mailing Addres Registration S		Street Address: Registration Section	าก		
Division of Corporations		Division of Corpor	ations		

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

Registration Section

TO:

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 (1994) an health all a **OF**

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8961 OKEECHOBEE, 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 April 20, 2021 and assigned

Florida document number L21000184098 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." 6180 NW 63rd Way Enter new principal offices address, if applicable: Parkland, FL 33067 (Principal office address MUST BE A STREET ADDRESS) 6180 NW 63rd Way Enter new mailing address, if applicable: Parkland, FL 33067 (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:

		Florida Zip Code
New Registered Office Address:	Enter Florida street add	iress
Name of New Registered Agent:		

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: The Section Section 1995

MGR = Manager

AMBR = Authorized Member

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<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Stephen Screnci	2700 N. Military Trail, Suite 355	□Add
		Boca Raton, FL 33431	■Remove
			□Change
MGR	Severino Rodrigues	6180 NW 63rd Way	
		Parkland, FL 33067	□Remove
			□ Change
MGR Gregory R	Gregory Roth	17703 Lomond Court	■Add
		Boca Raton, FL 33496-1032	□Remove
			□ Change
			□Add
			□Remove
			□Change
			□Add
			□ Remove
			□ Change
			□Add
			□Remove
			□Change

). If amen	ding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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(If an effe Note: 1	te date, if other than the date of filing:
ecord is file	
Dated _	June 30 2021 Wignature of a member or authorized representative of a member
	(W) -
	Signature of a member or authorized representative of a member
	Stephen Screnci
	Typed or printed name of signee

Filing Fee: \$25.00