## L21000270508

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## **COVER LETTER**

. TO:

Registration Section

Divisi	ion of Cor	porations ,	•	.•			
	ECHO 2204	4 LLC					
SUBJECT: _		Name of Lin	nited Liability Company				
The enclosed A	Articles of	Amendment and fee(s) are sub	mitted for filing.				
Please return a	ll correspo	ndence concerning this matter	to the following:				
		NORMAN S. WEINSTEI	N				
			Name of Person				
		ECHO 2204 LLC					
			Firm/Company				
		2200 BUTTS ROAD SUI	ΓE 310				
			Address				
		BOCA RATON, FL 3343	ı				
			City/State and Zip Code	2			20
		MPRIEST@STATESIDEC	AP.COM to be used for future annua	A company of Francis		2	2021 JU
For further info	ormation co	oncerning this matter, please c		a report nouncation)			
MELANIE PR	IEST		561 27	78-9292			·
	Name of	Person	Area Code	Daytime Telephor	ne Number	-	): <u>"</u> -b
Enclosed is a cl	heck for th	e following amount:					
■ \$25.00 Fili	ng Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee Certified Copy (additional copy is en	nclosed)	\$60.00 Filin Certificate of Certified Co (additional cop	of Status	
Regis Divis		ection orporations	_	Address: ration Section on of Corporation	ıs		
P.O. Box 6327 Tallahassee, FL 32314				entre of Tallahass  N. Monroe Street,			

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ECHO 2204 LLC	
(Name of the Limited Liability Company as it now appears on of (A Florida Limited Liability Company)	ur records.)
The Articles of Organization for this Limited Liability Company were filed on JUNE 10 Florida document number L21000270508	, 2021 and assigned
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 designate	ion "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
	2
B. If amending the registered agent and/or registered office address on our records	s, enter the name of the new register
agent and/or the new registered office address here:	29
Name of New Registered Agent:	
New Registered Office Address:	CT CT
Enter Florida stre	ret address
	. Florida

## 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.

City

Zip Code

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 AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	KERSTIN D.WEINSTEIN	2200 BUTTS ROAD SUITE 310	
		BOCA RATON, FL 33431	≣Remove
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cord specifies a delayed effec s filed.	tive date, but n	ot an effective	time, at 12:0	l a.m. on the e	arlier of: (b)	The 90th	day after th
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