

L21000303371

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

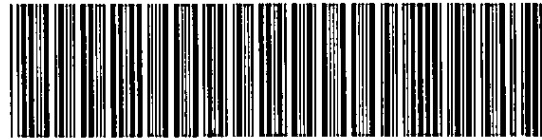
(Document Number)

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07/19/21--01021--023 **25.00

21 JUL 19 PM 3:11
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**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

21 JUL 19 PM 3:11

ECCOVENTURA 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 07/01/2021 and assigned
Florida document number L21000303371.

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 "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

5284 NW 114 AVE

UNIT 201

DORAL, FL 33178

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

5284 NW 114 AVE

UNIT 201

DORAL, FL 33178

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:

New Registered Office Address:

5284 NW 114 AVE UNIT 201

Enter Florida street address

DORAL

City

. Florida 33178

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 Changing Registered Agent, Signature of New Registered Agent

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

21 JUL 19 PM 3:11

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	DI CAMPO, DOMENICO	8000 NW 25TH ST	<input type="checkbox"/> Add
		STE 300	<input checked="" type="checkbox"/> Remove
		DORAL, FL 33122	<input type="checkbox"/> Change
MGR	DI CAMPO, DOMENICO	5284 NW 114 AVE	<input checked="" type="checkbox"/> Add
		UNIT 201	<input type="checkbox"/> Remove
		DORAL, FL 33178	<input type="checkbox"/> Change
MGR	DI CAMPO, GIUSEPPE	8000 NW 25TH ST	<input type="checkbox"/> Add
		STE 300	<input checked="" type="checkbox"/> Remove
		DORAL, FL 33122	<input type="checkbox"/> Change
MGR	DI CAMPO, GIUSEPPE	5284 NW 114 AVE	<input checked="" type="checkbox"/> Add
		UNIT 201	<input type="checkbox"/> Remove
		DORAL, FL 33178	<input type="checkbox"/> Change
MGR	FALCHINI, GABRIELA	8000 NW 25TH ST	<input type="checkbox"/> Add
		STE 300	<input checked="" type="checkbox"/> Remove
		DORAL, FL 33122	<input type="checkbox"/> Change
MGR	FALCHINI, GABRIELA	5284 NW 114 AVE	<input checked="" type="checkbox"/> Add
		UNIT 201	<input type="checkbox"/> Remove
		DORAL, FL 33178	<input type="checkbox"/> Change

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

21 JUL 19 PM 3:11

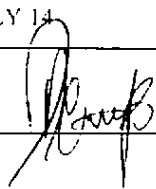
E. Effective date, if other than the date of filing: 07/14/2021 (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated JULY 14 2021



Signature of a member or authorized representative of a member

DI CAMPO DOMENICO

Typed or printed name of signee



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Detail by Entity Name

Florida Limited Liability Company
ECCOVENTURA LLC

Filing Information

Document Number	L21000303371
FEI/EIN Number	NONE
Date Filed	07/01/2021
Effective Date	07/01/2021
State	FL
Status	ACTIVE

Principal Address

8000 NW 25TH ST
STE 300
DORAL, FL 33122

Mailing Address

8000 NW 25TH ST
STE 300
DORAL, FL 33122

Registered Agent Name & Address

DI CAMPO, DOMENICO
8000 NW 25TH ST
STE 300
DORAL, FL 33122

Authorized Person(s) Detail

Name & Address

Title MGR

DI CAMPO, DOMENICO
8000 NW 25TH ST, STE 300
DORAL, FL 33122

Title MGR

DI CAMPO, GIUSEPPE
8000 NW 25TH ST, STE 300
DORAL, FL 33122