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| (Requestor's Name) |
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| PICK-UP WAIT MAIL |
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| (Business Entity Name) |
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| Certified Copies Certificates of Status |
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| Special Instructions to Filing Officer: |
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COVER LETTER

| TO: Registration Se Division of Cor | | | | | |
|---|---|--|--|--------------------|----------------------|
| | lth Partners, LLC | | • | | |
| SUBJECT: | Name of Lim | ited Liability Company | | | |
| The enclosed Articles of | Amendment and fee(s) are sub | mitted for filing. | | | |
| Please return all correspo | ondence concerning this matter | to the following: | | | |
| | Jonah Stevens | | | | |
| | | Name of Person | | | |
| | Ecom Wealth Partners, LL | C | | | |
| | | Firm/Company | | | |
| | 7941 Shalimar Street | | | | |
| | | Address | | | |
| | Miramar, FL 33023 | | | | |
| | | City/State and Zip Code | | | |
| | ecomwealthpartners@gmai | | | | 202 |
| | | to be used for future annual report notificatio | n) | | 2621 J.T. |
| For further information c | oncerning this matter, please c | all: | | | . - ^> |
| Jonah Stevens | | 646 327-9492 at () | | · | 7 p |
| Name o | d Person | Area Code Daytime Tele | phone Number | • | زې |
| Factorial to a strong Card | Callandina and and | | | . 1 | 1, |
| Enclosed is a check for th ■ \$25.00 Filing Fee | □ \$30.00 Filing Fee & Certificate of Status | ☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) | S60.00 Fili Certificate Certified C tadditional c | e of Statu Copy | |
| Mailing Addres Registration S Division of C P.O. Box 632 | Section forporations 17 | Street Address: Registration Section Division of Corpora The Centre of Tallah | tions nassee | | |
| Tallahassee, I | FL 32314 | 2415 N. Monroe Str | eet. Suite 81 | 0 | |

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| Ecom Wealth Partners, LLC | |
|--|--|
| (<u>Name of the Limited Liability Company as it no</u> (A Florida Limited Liability Co | w appears on our records.) mpany) |
| The Articles of Organization for this Limited Liability Company were file | d on July 13th, 2021 and assigned |
| Florida document number 1.21000321046 | |
| This amendment is submitted to amend the following: | |
| A. If amending name, enter the new name of the limited liability com | <u>pany here</u> : |
| The new name must be distinguishable and contain the words "Limited Liability Compar | ny," the designation "LLC" or the abbreviation "L.L.C." |
| Enter new principal offices address, if applicable: | |
| (Principal office address MUST BE A STREET ADDRESS) | . 2 |
| | |
| | |
| Enter new mailing address, if applicable: | |
| Mailing address MAY BE A POST OFFICE BOX) | |
| | نهم زبر: |
| | 1 |
| B. If amending the registered agent and/or registered office address o agent and/or the new registered office address here: | n our records, <u>enter the name of the new register</u> |
| Name of New Registered Agent: | |
| New Registered Office Address: | |
| - / | Enter Florida street address |
| | , Florida |
| Cin | 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

| <u>Title</u> | <u>Name</u> | Address | Type of Action |
|--------------|---------------|---|--|
| MGR | Jonah Stevens | 6250 Griffin Road, Building A Suite 109 | ■ Add |
| | | Davie, FL 33314 | □Remove |
| | | | □ Change |
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| Effective date if other than | the date of filing: must be specific and cannot be prior to date of filing of siling to solve the specific and cannot be prior to date of filing of solve the specific specif | (optional) or more than 90 days after filing.) Pursuant to 605.02 filing requirements, this date will not be listed | 207 i Las t |
| Note: If the date inserted in this | e Department of State's records. | | |
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