L22000240624

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FILED PH 4: 02
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SECRETARY OF STATI

COVER LETTER

TO: Registration Se Division of Cor					
SUBJECT: ECI CONS	TRUCTION AND POOLS 1.1. Name of Lim	.C ited Liability Company			
	Amendment and fee(s) are sub				
	JOHN JACKSON	Name of Person			
	ECI CONSTRUCTION A				
	PO BOX 5493	Address			
	KEY WEST FL 33040	City/State and Zip Code			
	OFFICE ECICONSTRUCT E-mail address: (TION@GMAIL.COM to be used for future annual repo	rt notification)	s 2 1	
For further information c JOHN JACKSON	oncerning this matter, please c	all: at (305) 304-66	21	2022 AUG 30 PH SECRETARY OF TALLAHASSE	
Name o	f Person	Area Code D	aytime Telephone Number	RY OF S	M
Enclosed is a check for the	ne following amount:			F. 02	
료 \$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) Certified	ling Fee. te of Status &	

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

Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

A.

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ECI CONSTRUCTION AND POOLS LLC		
(Name of the Limited Liability Compa (A Florida Limited	Liability Company)	
he Articles of Organization for this Limited Liability Company	were filed on MAY 24, 2022	and assigned
lorida document number 1.22000240624		
his amendment is submitted to amend the following:		
If amending name, enter the new name of the limited liab	oility company here:	
he new name must be distinguishable and contain the words "Limited Liab	ility Company," the designation "LLC" or t	the abbreviation "L.L.C."
nter 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)		
3. If amending the registered agent and/or registered office	address on our records, enter the	name of the new registe
gent and/or the new registered office address here:	<u> </u>	_
Name of New Registered Agent:		2022 AUG 30 SECRETARY
New Registered Office Address:	Enter Florida street address	
	, Florid	PH 4:
	City	- Zup (CO)

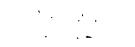
New Registered Agent's Signature, if changing Registered Agent:

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:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	ALEXANDRA JACKSON	16 ARBUTUS DR	≅ Add
		KEY WEST FL 33040	□Remove
			□ Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
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		TAL TAL	2022 A	
		LAI	AUG 3	
ilifan c	Tective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days a	ptiona∰. dter filing.∑f	ursuant to	6 95:03 07 (
Note	If the date inserted in this block does not meet the applicable statutory filing requirements, nent's effective date on the Department of State's records.	this d解释	ill n et be	listed as t
doca	tent 3 effective date on the Department of State 5 records.	, FL	կ։ 03	
he reco	rd specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of iled.	h) The الله		after the
	ATI//1187F 2.1			
Date	AUGUST 24 2022			
	Signature of a member or authorized representative of a member			
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