L23000072469

(Requestor's Name)
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(12.1.1.1.1)
(Civ. (Co.s.s. (7) - (10) 40)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
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2023 SEP 25 PM 12: 58



August 23, 2023

DIOGO ROCHA ECCO PLANET USA, LLC 7131 GRAN NATIONAL DRIVE UNIT #103 ORLANDO, FL 32819 US

SUBJECT: TARGET SOURCING AND CONSULTING LLC

Ref. Number: L23000072469

We have received your document for TARGET SOURCING AND CONSULTING LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a Corporation, but your entity is a LLC. Please complete and return the enclosed blank form(s).

Please return your document, along with a copy of this letter, within 60 days of your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Antoinette A Gonzalez Regulatory Specialist II

Letter Number: 723A000196445

SEP 2 0 2023

COVER LETTER

Tallahassee, FL 32314

	Registration S Division of Co				
SUBJEC'	TARGET SOURCING AND CONSULTING LLC				
SUBJEX,	' · <u></u>	nited Liability Company			
The enclo	sed Articles of	f Amendment and fee(s) are sub	omitted for filing.		
Please ret	urn all corresp	ondence concerning this matter	to the following:		
		DIOGO ROCHA			
			Name of Person		
	ECCO PLANET USA, LLC				
	Firm/Company				
	7131 GRAN NATIONAL DRIVE UNIT #103				
	Address				
		ORLANDO, FL 32819			
	City/State and Zip Code				
	DIOGO@ECCOPLANETCONSULTING.COM				
For furthe	r information (E-mail address: (concerning this matter, please c	(to be used for future annual report notification)	و و د اد و د اد و د اد و د اد و د اد و د	
DIOGO R			321 310-6191	يُربِهِ لِيَّامِ وَعَلَ	
	Name	of Person	City/State and Zip Code CONSULTING.COM (to be used for future annual report notification) call: 321 310-6191 Area Code Daytime Telephone Number	,	
Enclosed i	is a check for t	the following amount:			
€ \$25.0	0 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & ☐ \$60.00 Filing Fee, Certified Copy (additional copy is enclosed) ☐ Certified Copy (additional copy is enclosed)		
F L	dailing Addre Registration Division of C P.O. Box 632	Section Corporations	Street Address: 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 OF

TARGET SOURCING AND CONSULTING 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 02/15/2023 __ and assigned Florida document number 1.23000072469 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: N/A The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." N/A Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) N/A Enter new mailing address, if applicable: (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: N/A Name of New Registered Agent: New Registered Office Address: Enter Florida street address

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.

Cirv

If Changing Registered Agent, Signature of New Registered Agent

. Florida

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
AMBR	H, SYED ARSHAD	7131 GRAN NATIONAL DRIVE UNIT #103	
		ORLANDO, FL 32819	□Remove
AMBR	H, SYEDA SUMAIRA	7131 GRAN NATIONAL DRIVE UNIT #103	= Add
		ORLANDO, FL 32819	□Remove
			Change
			🗆 Add
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			ZZ hange SEP ZZ LAdd
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			Change
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JADIR BERGONSI	AMBR		
H, SYED ARSHAD	AMBR		
H, SYEDA SUMAIRA	AMBR		_
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effective date is listed, the date must be sp	ecific and cannot be prior to date of filing to sees not meet the applicable statutory is	or more than 90 days after filing.) Pursuant & filing requirements, this date will not be	
cord specifies a delayed effective date s filed	, but not an effective time, at 12:01 a	.m. on the earlier of: (b) The 90th day	after the
SEP, 19	2023		
	Museine	Swymins	
(1/4/1) Signa	use of a member or authorized represent	ative of a member	_
TAINE R	ERGONSI/H, SYED ARSHAD/I	L SYFDA SUMAIRA	

Filing Fee: \$25.00