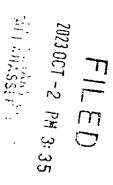
L23000382622

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:





000415198360



COVER LETTER

TO: Registration Section Division of Corporations

SUBJECT:		O ENTERPRISES LEC		
	Name of Lim	ited Liability Company		
Te enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please return all correspo	ondence concerning this matter	to the following:		
	LOVETTE DOBSON			
		Name of Person		
	Firm/Company 17350 STATE HWY 249 STE 220			
		Address		
	HOUSTON TX, 77064			
		City/State and Zip Code	2	
	EFILE1234@INCFILE.CO	M to be used for future annua	I i i i i i i i i i i i i i i i i i i i	
A constituents on the Property of			arreport notification)	
Tor further information (oncerning this matter, please c	att:		
LOVETTE DOBSON		1 at ()	888-462-3453	
Name c	of Person	at () Area Code	Daytime Teleph	one Number
Linclosed is a check for t	he following amount:			
₩ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee Certified Copy (additional copy is en		\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
27.77		£2		

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

UN	TTED ECHO ENTERPRISES LLC		
(Name of the Limited	d Liability Company as it now appears A Florida Limited Liability Company)	on our records.)	
The Articles of Organization for this Limited Lia florida document number	bility Company were filed on	08/15/2023	and assigned
This amendment is submitted to amend the follow	wing:		
A. If amending name, enter the new name of t	the limited liability company her	<u>'e</u> :	
UNITEDECHO ENTERPRISES LLC			
he new name must be distinguishable and contain the wo	rds "Limited Liability Company." the des	signation "LLC" or the a	bbreviation "L.L.C."
inter new principal offices address, if applica	bler		
, ,			
Principal office address MUST BE A STREET	ADDRESS/		
Enter new mailing address, if applicable:			
Mailing address MAY BE A POST OFFICE B	(OX)		
			
B. If amending the registered agent and/or regent and/or the new registered office address		cords, <u>enter the nar</u>	ne of the new regist
Name of New Registered Agent:			
New Registered Office Address:			
registered office reading.	Enter Floric	la street address	
		Florida	
	City	, i iorida	Zin Code

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

Thereby 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

fitte	Name	Address	Type of Action
 			
			Remove
		 	□Change
			□Add
			Remove
		 -	Change
			□Add
			Remove
			Change
			DAdd
			□Remove
			Change
·			①Add
			Remove
			□Change
- u			DAdd
			□Remove
			□Change

· . . .

		<u> </u>	
			_
-			
			
	 		
			
ffective date, if other than the d an effective date is listed, the date must lote: If the date inserted in this bloc ocument's effective date on the Dep	ate of filing: e specific and cannot be prior to date of the does not meet the applicable statulartment of State's records.	(option iling or more than 90 days after tory filling requirements, this	onal) filing. (Pursuant to 605 020 date will not be listed)
	date, but not an effective time, at 12	01 a.m. on the earlier of; (b)	The 90th day after th
September 29th	2023		5.5
	And London		2023 OCT -2
	gnature of a member or author/ed repro	esentative of a member	123
	Ariel Lozada		- N

Filing Fee: \$25.00