## L24000465002

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## **COVER LETTER**

O:

Registration Section
Division of Corporations

**Division of Corporations** 

Tallahassee, FL 32314

P.O. Box 6327

## Echo-Spencer, LLC **UBJECT:** Name of Limited Liability Company he enclosed Articles of Amendment and fee(s) are submitted for filing. lease return all correspondence concerning this matter to the following: Justin Hooper Name of Person Echo-Spencer, LLC Firm/Company 7070 Highlands Creek Avenue Address Lakeland, FL 33813 City/State and Zip Code echo.spencer7020@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Justin Hooper 698-2089 Daytime Telephone Number Name of Person Enclosed is a check for the following amount: ☐ \$30.00 Filing Fee & ■ \$25.00 Filing Fee □ \$55.00 Filing Fee & □ \$60.00 Filing Fee. Certificate of Status Certified Copy Certificate of Status & (additional copy is enclosed) Certified Copy (additional copy is enclosed) Mailing Address: Street Address: Registration Section Registration Section

**Division of Corporations** 

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Echo-Spencer, LLC		
( <u>Name of the Limited Liability Compa</u> (A Florida Limited	nny as it now appears on our records.) Liability Company)	<del></del>
e Articles of Organization for this Limited Liability Company	were filed on November 01, 2024	and assigned
rida document number <u>1.24000465002</u> .		
s amendment is submitted to amend the following:		
If amending name, enter the new name of the limited liab	ility company here:	
new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the	abbreviation "L.L.C."
ter new principal offices address, if applicable:		
rincipal office address MUST BE A STREET ADDRESS)		<u>~</u>
		TA TA
		KOV ETT
ter new mailing address, if applicable:	<del> </del>	18
ailing address MAY BE A POST OFFICE BOX)		SE SE
		S7 9
		25 417E
If amending the registered agent and/or registered office ent and/or the new registered office address here:	address on our records, <u>enter the na</u>	me of the new registe
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	*** 4.	
	, Florida _ , City	

ew Registered Agent's Signature, it changing Registered Agent:

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

amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added removed from our records:

|GR = Manager | MBR = Authorized Member

<u>itle</u>	<u>Name</u>	<u>Address</u>	Type of Action
IGR	Justin Hooper	7070 Highlands Creek Avenue	■Add
		Lakeland, FL 33813	□Remove
		<del></del>	□Change
	<del></del>		□Add
			□Remove
			□Change
			Add 2024 SEC TA
			SECRETARY CHARS
			AM % 25 OF STATE SEE, FL
			□Remove
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			□Add
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			□Change

Typed or printed name of signee