PF2P8M

(Requestor's Name)
(Address)

(Address)
(City/State/Zip/Phone #)
(only-online)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
<u> </u>
Special Instructions to Filing Officer:

Office Use Only



400411920774

07/13/23--01016--001 **35.00

SECRETARY SEE FATT

M

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	ORATION: Echion USA Inc.			
DOCUMENT NUM	M89579			
The enclosed Article	s of Amendment and fee are sub	omitted for filing.		
Please return all corr	espondence concerning this mat	ter to the following:		
	Charlene Ranalli			
	Name of Contact Person			
Echion USA Inc.				
Firm/ Company				
8890 W Oakland Park Blvd, Suite 201				
Address				
	Sunrise, FL 33351			202
		City/ State and Zip Code	<u> </u>	社の。
charlene.ranalli@echion.net				二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十
	E-mail address: (to be us	ed for future annual report	notification)	<u></u>
For further informati	on concerning this matter, pleas	e call:		SIZO JUL 13 MI TI WI
Charlene Ranalli		at (749-8990	Li
Name	of Contact Person	Area Co	de & Daytime Telephone Number	
Enclosed is a check (for the following amount made p	payable to the Florida Depa	artment of State:	
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	☐\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	

Mailing Address

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address

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

Articles of Amendment to Articles of Incorporation of

A. If amending name, enter the new name of the corporation: The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co." A professional corporation name must contain the word "chartered." professional association," or the abbreviation "P.A. B. Enter new principal office address, if applicable; (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable; (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address: Name of New Registered Agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Agent's Signature, if changing Registered Agent: The response of New Registered Agent. I am familiar with and accept the obligations of the position. Signature of New Registered Agent, if changing	Echion USA Inc.		
(Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Prafit Corporation adopts the following amendments, its Articles of Incorporation. A. If amending name, enter the new name of the corporation: The new name must be distinguishable and contain the word "corporation." "company," or "incorporated" or the abbreviation "Corp." "Inc.," or Co.," or the designation "Corp." "Inc.," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address if applicable: (Principal office address MENT RE A STREET ADDRESS) C. Enter new mailing address MENT RE A STREET ADDRESS) If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida server oddress) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position. Signature of New Registered Agent. if changing	(Name of Corporation as currently file	ed with the Florida Dept. of State)	
Pursuant to the provisions of section 607.1006. Florida Statutes, this Florida Prafit Corporation adopts the following amendments its Articles of Incorporation: A. [Lamending name, enter the new name of the corporation: The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp." Inc., "or Co.," or the designation "Corp." "Inc.," or "Co." A professional corporation name must contain the word "chartered," professional association, "or the abbreviation" P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS.) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or the new registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida sivest address) New Registered Office Address: (City) Florida [Zip Code) New Registered Agent's Signature, if changing Registered Agent: 1 hereby accept the appointment as registered agent. 1 am familiar with and accept the obligations of the position. Signature of New Registered Agent. If changing	M89579		
A. If amending name, enter the new name of the corporation: The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co." A professional corporation name must contain the word "chartered." professional association," or the abbreviation "P.A. B. Enter new principal office address, if applicable; (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable; (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address: Name of New Registered Agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Agent's Signature, if changing Registered Agent: The response of New Registered Agent. I am familiar with and accept the obligations of the position. Signature of New Registered Agent, if changing	(Document Number of Con	rporation (if known)	
The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," Inc.," or "Co.," or the designation "Corp.," Inc.," or "Co.," A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUNT BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address: (City) (Zip Code) New Registered Agent's Signature, if changing Registered Agent: 1 am familiar with and accept the obligations of the position. Signature of New Registered Agent, if changing	Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida</i> Articles of Incorporation:	ida Profit Corporation adopts the foll	owing amendment(s)
The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," Inc.," or "Co.," or the designation "Corp.," Inc.," or "Co.," A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUNT BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address: (City) (Zip Code) New Registered Agent's Signature, if changing Registered Agent: 1 am familiar with and accept the obligations of the position. Signature of New Registered Agent, if changing	A. If amending name, enter the new name of the corporation:		
name must be distinguishable and contain the word "corporation." "company," or "incorporated" or the abbreviation "Corp" Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE ASTREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address: (Cay) (Cay) (Cay) (Sup Code) Sew Registered Agent's Signature, if changing Registered Agent: Thereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position. Signature of New Registered Agent, if changing			Thu wasa
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address: (City) (Zip Code) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position. Signature of New Registered Agent, if changing	"Inc.," or Co.," or the designation "Corp." "Inc," or "Co". A pre-	pany," or "incorporated" or the abbre ofessional corporation name must c	viation "Corp.,"
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent	B. Enter new principal office address, if applicable:		
D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address: (City) (Zip Code) New Registered Agent's Signature, if changing Registered Agent: I am familiar with and accept the obligations of the position. Signature of New Registered Agent, if changing	(Principal office address <u>MUST BE A STREET ADDRESS</u>)		
D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address: (City) (Zip Code) New Registered Agent's Signature, if changing Registered Agent: I am familiar with and accept the obligations of the position. Signature of New Registered Agent, if changing	_		10 63
D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address: (City) (Zip Code) New Registered Agent's Signature, if changing Registered Agent: I am familiar with and accept the obligations of the position. Signature of New Registered Agent, if changing	-		
D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address)	C. Enter new mailing address, if applicable:		三百百
D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent	(Mailing address MAY BE A POST OFFICE BOX)		G
Name of New Registered Agent (Florida street address) New Registered Office Address: (City) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position. Signature of New Registered Agent, if changing	_		=======================================
Name of New Registered Agent (Florida street address) New Registered Office Address: (City) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position. Signature of New Registered Agent, if changing			
Name of New Registered Agent (Florida street address) New Registered Office Address: (City) (Zip Code) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position. Signature of New Registered Agent, if changing		in Florida, enter the name of the	, <u>m</u>
New Registered Office Address:			
New Registered Office Address: (City) (City) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position. Signature of New Registered Agent, if changing	Name of New Registered Agent		
New Registered Office Address: (City) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position. Signature of New Registered Agent, if changing		1 house	
(City) (Zip Code) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position. Signature of New Registered Agent, if changing	trioriaa street a	aaressi	
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position. Signature of New Registered Agent, if changing			(Zin Code)
I hereby accept the appointment as registered agent.—I am familiar with and accept the obligations of the position. Signature of New Registered Agent, if changing	(Cit)	,	(134)
I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position. Signature of New Registered Agent, if changing			
Signature of New Registered Agent, if changing	New Registered Agent's Signature, if changing Registered Agent:		
	I hereby accept the appointment as registered agent. I am familiar with	and accept the obligations of the posi	tion.
	Signature of New Regist	tered Agent, if changing	
Check if applicable	Check if applicable		

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	V	Michael Hotte	8890 W Oakland Park Blvd, #201
Add			Sunrise, FL 33351
Remove			
2) Change			
Add			
Remove 3) Change			51 CT
Add			· _, · · ·
Remove			
4) Change			
Add			
Remove			11.
5) Change			
Add			
Remove			
6) Change			
Add Remove			

The date of each amendment(s) at date this document was signed.	option:	, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this b document's effective date on the De	ock does not meet the applicable statutory filing requirements, t partment of State's records.	his date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were ado action was not required.	pted by the incorporators, or board of directors without shareholds	er action and shareholder
☐ The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes cast for the amend flicient for approval.	lment(s)
☐ The amendment(s) was/were app must be separately provided for	roved by the shareholders through voting groups. The following seach voting group entitled to vote separately on the amendment(s,	italement):
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
selected	rector, president or other officer – if directors or officers have not it, by an incorporator – if in the hands of a receiver, trustee, or other ed fiduciary by that fiduciary) (Typed or printed name of person signing) President (Title of person signing)	been er court SECREIAN SECRETATION TALLAN SE