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COVER LETTER

	egistration Sec ivision of Corp				
SUBJECT	Sitex Aquati	ics, LLC			
SOBJECT	•	Name of Limi	ited Liability Company		
The enclos	ed Articles of A	Amendment and fee(s) are sub-	mitted for filing.		
Please retu	lease return all correspondence concerning this matter to the following:				
		Mr. Joseph Craig			
		Address Jacksonville, FL 32256 City/State and Zip Code susan@sitexaquatics.com E-mail address: (to be used for future annual report notification) concerning this matter, please call: 407			
		Sitex Aquatics, LLC			
			ADDRESS: Name of Limited Liability Company diment and fee(s) are submitted for filling, the concerning this matter to the following: (r. Joseph Craig Name of Person itex Aquatics, LLC Firm/Company 543 Gate Parkway, #104-127 Address acksonville, FL 32256 City/State and Zip Code san@sitexaquatics.com E-mail address: (to be used for future annual report notification) ning this matter, please call: at (1) 717-5851 Area Code Daytime Telephone Number owing amount: \$30.00 Filing Fee & S55.00 Filing Fee & Certificate of State Certified Copy (additional copy is enclosed) ADDRESS: Section Registration Section Division of Corporations		
		7643 Gate Parkway, #104-	127		
			Address		
		Jacksonville, FL 32256			
			City/State and Zip Code		
		_ •			
For further	information co		·	otification)	
Joseph Cra	aig				
	Name of	Person		time Telephone Number	
Enclosed i	s a check for the	e following amount:			
\$25.00	Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	Certified Copy	Certificate of Status & Certified Copy	
	Division	n of Corporations	Division of Cor	porations	

Tallahassee, FL 32314

Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SITEX AQUATICS, LLC		
(Name of the Limited Liability Com (A Florida Limite	npany as it now appears on our records.) ed Liability Company)	
The Articles of Organization for this Limited Liability Compa	iny were filed on 05/11/2016	and assigned
Florida document number L16000092131		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited li	ability company here:	
The new name must be distinguishable and contain the words "Limited Li	ability Company," the designation "LLC" or the at	breviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		16 NOV
	,	100 -2 PH 2: 05
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		2:05
		<u>ु</u> ८
B. If amending the registered agent and/or registered registered agent and/or the new registered office address h	office address on our records, <u>enter</u> tere:	the name of the new
Name of New Registered Agent:		<u></u>
New Registered Office Address:	Edw. Florida do a del	
	Enter Florida street address	
······································	, Florida	7 in Code

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 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

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	SITEX LLC	501 SHAWNEE TRAIL	□ Add
		GENEVA, FL 32732	■ Remove
			Change
MGR	CRAIG, JOSEPH T.	501 SHAWNEE TRAIL	■ Add
		GENEVA, FL 32732	□ Remove
			Change
***************************************			Add
			□ Remove
		☐ Change	
			Add 16 New -2e PH 2: 05 CRemove
			□ Remove
			□ Change
			□ Add
			☐ Remove
			Change

	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)		
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-	Or Charles	NON-	
-	DIVISION OF ICREGRATIONS	-2 F	
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an offi lote:	ve date, if other than the date of filing:	05.0207 sted as ((3) h
e rec	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earl 90th day after the record is filed.	lier of	;
ated .	10.21.16		
	1		
/	Signature of a member or authorized representative of a member		
	Joseph T. Craig		
	Typed or printed name of signee		

Page 3 of 3

Filing Fee: \$25.00