L2000C272813

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12/14/20

COVER LETTER

TO:

TO: Registration So Division of Co							
Aqua Hous	se Rentals LLC Amendment						
SUBJECT.	Name of Lin	nted Liability Company					
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.					
Please return all correspo	ondence concerning this matter	to the following:					
	Violeta Daskalova						
		Name of Person	· · · · · · · · · · · · · · · · · · ·				
·		Firm/Company					
	305 marina Blvd						
		Address					
	Mandeville LA 70471						
		City/State and Zip Code	· · · · · · · · · · · · · · · · · · ·				
	vkdaskalova@gmail.com						
For further information c	n-mail address: (oncerning this matter, please c	to be used for future annual report no all:	tification)				
Violeta Daskalova		301 2042850 at ()					
Name o	f Person	Area Code Dayti	me Telephone Number				
Enclosed is a check for the	he following amount:						
■ \$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)				
Mailing Addres		Street Address:					
Registration Section Division of Corporations		Registration Section of Co					
P.O. Box 632		Division of Corporations The Centre of Tallahassee					
Tallahassee, 1	FL 32314	2415 N. Monroe Street, Suite 810					

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Aqua House Rentals LLC		
(Name of the Lin	nited Liability Company as it now appears (A Florida Limited Liability Company)	on our records.)
The Articles of Organization for this Limited		1/2020 and assigned
forida document number L20000272813	<u> </u>	
This amendment is submitted to amend the fo	llowing:	
A. If amending name, enter the new name	of the limited liability company her	<u>c</u> :
he new name must be distinguishable and contain the	words "Limited Liability Company," the des	
Enter new principal offices address, if appl	icable:	- 20 HO
Principal office address MUST BE A STRE	ET ADDRESS)	
		() () ()
		4 = 0
inter new mailing address, if applicable:		: <u>:</u>
<u>Mailing address MAY BE A POST OFFICE</u>	EBON)	· 🗴
If amending the registered agant and/or	varietamed office add	
. If amending the registered agent and/or gent and/or the new registered office addr	registered office address on our rec <u>ess here</u> :	ords, enter the name of the new regis
Name of New Registered Agent:	Rosica Stephenson	
New Registered Office Address:	621 LYNDELL LANE UNIT B	
	Enter Florade	i street address
	PANAMA CITY BEACH	Fiorida <u>3240</u> 7
•	City	Zıp Code

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

I hereby accept the appointment as registered or and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to a proper and complete performance of my duties, and I am familiar with and accept the obligations of the 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, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Rosica Stephenson	621 Lyndellf.n Unit B. Panama City Beach FL 324	07 ≣ Add
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			202 □ Add
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ecord spec is filed.	ifies a delayed et	Teetive date, bu	t not an effe	ctive time, a	i 12:01 a.m. o	n the earlier (of: (b) The	90th day af	ter the
nted C	et 36	Signature	<u> </u>	020					
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	· · · · · · · · · · · · · · · · · · ·	Signature	of a prember	or authorized	representative (of a member			
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Filing Fee: \$25.00