200	1 UNI	FORM BUS	INESS REPO	ORT ((UBR)	·		
DOCUMENT # A9300000065 1. Entity Name						, ;		
H2O PAF	rtners, lin	IITED			į.	FILED		
Principal Place of Business Mailing Address					01 J	AN 31 AM 11: 08	•	
1061 WEST OAKLAND PARK BLVD. FT. LAUDERDALE FL 33311			1061 WEST OAKLAND PARK BLVD. FT. LAUDERDALE FL 33311			ETARY OF STATE HASSEE, FLORIDA	1871 8877 8878 8781 877 188	
2. Principal F	Place of Busin	ess	3. Mailing Address	3. Mailing Address			91/1 00 21 1 401/6 0 12 9 1 0 112 1 06)	
Suite, Apt. #, etc.			Suite, Apt. #, etc.			DO NOT WRITE IN THIS	SPACE	
City & State			City & State	City & State		4. FEI Number 65-0391405	Applied For Not Applicable	
Zip		Country	Zip	Countr	/	5. Certificate of Status Desired	\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent					7. Name and Address of New Registered Agent			
MILLER, MARK								
1937 SE 15TH COURT					Street Address (P.O. Box Number is Not Acceptable)			
POMPANO BEACH FL 33062								
				-	City FL Zip Code			
8. The above	named entity	submits this statement for	or the purpose of changing it	s registered	office or registe	ered agent, or both, in the State of Florida.	1	
SIGNATURE	Signature, typed o	or printed name of registered agent	and title if applicable. (NO	TE: Registered A	agent signature require	od when reinstating) DATE		
9. Capital Contributions as Shown on record. \$150,000.00 10. Amount of Capital in FLORIDA to date					SEE REVERSE SIDE FOR FEE INFORMATION			
						TERED AND ACTIVE WITH THIS OFFICE nt must be filed to change a general par		
12.		GENERAL PARTNE		13.		ADDRESS CHANGES ON		
DOCUMENT # K76276				STREET	ADDRESS			
STREET ADDRESS	REET ADDRESS 1061 W OAKLAND PK BLVD.			CITY-S	T-ZIP	5000056551184 -02/06/0101113016		
OCUMENT #			STREET	ADDRESS	-02/06/0101113016 ****\$26.25 ****\$26.25			
STREET ADDRESS CITY-ST-ZIP			CiTY-S	T-ZIP	·			
DOCUMENT # NAME				STREET	ADDRESS			
STREET ADDRESS CITY-ST-ZIP				CITY-S	r-ziP			
DOCUMENT # NAME	}			STREET	ADDRESS			
STREET ADDRESS CITY-ST-ZIP				CITY-S	T-ZIP	<u></u>		
DOCUMENT # NAME STREET ADDRESS				STREET	ADDRESS		:	
CITY-ST-ZIP				CITY-S1	-ZIP	· · · · · · · · · · · · · · · · · · ·		
DOCUMENT / 1 NAME STREET ADDRIESS				STREET	ADDRESS	- 		
CITY-ST-ZIP				CITY-ST	-ZIP			

SIGNATURE: X SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER / Date Daytime Phone #