L00000081530

(Requestor's Name)				
(Address)				
(Address)				
(/100/035)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
·				
(Business Entity Name)				
(Business Eliat, Hullie)				
(Document Number)				
Certified Copies Certificates of Status				
[
Special Instructions to Filing Officer:				
·				
,				

Office Use Only



200214243282

11/14/11--01004--024 **25.00

11 NOV 14 MILE OF SECRETARY OF STATI

D. BRUCE
NOV 1 6 2011
EXAMINER

COVER LETTER

TO:

Registration Section

Section of the section of the thoracon on Sugar Action

Division of Cor	porations					
SUBJECT:		OPERTIES, LLC ited Liability Company				
	Amendment and fee(s) are su	bmitted for filing.				
		DAVID S. LEE, SR.				
		Name of Person				
	H2	O PROPERTIES, LLC				
		Firm/Company	<u>.</u>	•		
	11	102 LANE PARK ROAD				
		Address		CECR LLA	= = = = = = = = = = = = = = = = = = =	-
TAVARES, FL 32778				HAS	11 AON	
		City/State and Zip Code		RY	£-	<u></u>
	rebe	ccadlland@earthlink.net	1.0	F 0F		П
	E-mail address: (to be used for future annual report not	ification)	101 101	AB II: 06	O
For further information co	oncerning this matter, please of	call:		STATE LORIDA	90	
DAVI	D S. LEE, SR.	at (352)	253-0872			
Name of	Person		me Telephone Number	r		
		. ,	•			
Enclosed is a check for th	e following amount:		,			
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclose	ed) Certified	te of Stati		sed)
Registra Division P.O. Bo	NG ADDRESS: ation Section n of Corporations ox 6327 ssee, FL 32314	STREET/COUR Registration Section Division of Corportion Building 2661 Executive Countries Tallahassee, FL 3	Center Circle 2301			

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

H2O PROPERTIES	, LLC			
(Name of the Limited Liability Company as it no (A Florida Limited Liability C	ompany)			
The Articles of Organization for this Limited Liability Company were file	d on 08/17/2006	and assigned		
Florida document number L06000081530 .				
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liability com	pany here:			
The new name must be distinguishable and end with the words "Limited Liabili"L.L.C."	ity Company," the designation	"LLC" or the abbreviation		
Enter new principal offices address, if applicable:				
(Principal office address MUST BE A STREET ADDRESS)		¥ 2 -		
		SSEY F		
Enter new mailing address, if applicable:		<u> </u>		
(Mailing address MAY BE A POST OFFICE BOX)	1	Omi on		
B. If amending the registered agent and/or registered office addr	ress on our records, ente	r the name of the new		
registered agent and/or the new registered office address here:				
Name of New Registered Agent:				
New Registered Office Address:				
	Enter Florida street a	address		
City		Zip 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 608, 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 the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

MGRM = Managing Member Title Title <u>Address</u> **Type of Action** <u>Name</u> DAVID S. LEE, SR. **MGRM** 11102 LANE PARK ROAD **✓** Add Remove TAVARES, FL 32778 MGR DAVID S. LEE, SR. 11102 LANE PARK ROAD ✓ Remove TAVARES, FL 32778 MGR JASON M. LEE 11102 LANE PARK ROAD Remove TAVARES, FL 32778 ☐ Add Remove ∏Add Remove $\prod Add$ Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Signature of a member or authorized representative of a member

DAVID S. LEE, SR.

2011

NOVEMBER 1

Dated

Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00