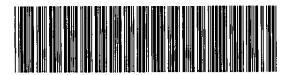
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## **COVER LETTER**

TO:	Registration Se Division of Cor					
SUBJEC	- · · ·	t Pools I LLC				
SUBJE		Name of Limit	ted Liability Company			
The enci	osed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please re	eturn all correspo	ndence concerning this matter	to the following:			
		James Fratangelo				
			Name of Person	<del></del>		
			Firm/Company	······································		
		45 Prospect Drive				
		Miami, FL 33133	Address			
		dave@assetsrc.com	City/State and Zip Code			
			to be used for future annual report notific	ation)		<u> </u>
For furth	er information o	oncerning this matter, please ca	all:			
David	Fratangelo		301 728-0646		ALLAHAS	2614 JAN 14
	Name of	Person	Area Code Daytime T	elophone Number		₽ Pd
Enclosed	is a check for th	e following amount:		<b>-</b> · · · · - · ·		. <u>12</u>
<b>∮</b> \$25.0	O Filing Foc	☐\$30.00 Filing Fee & Certificate of Status	Certified Copy (additional copy is enclosed)	□\$60.00 Filing I Certificate of Certified Cop (additional of	Poc, Status & py	<b>c</b> r`

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS:

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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Prospect Pools I LLC	•			
(Name of the Limite	d Liability Company as it now ap A Florida Limited Liability Compa	pears on our records.)		
	nization for this Limited Liability Company were filed on		_ and assigned	
This amendment is submitted to amend the following	owing:			
A. If amending name, enter the new name of	f the limited liability company	here:		
The new name must be distinguishable and end w "L.L.C."	ith the words "Limited Liability Co	ompany," the designation "Li	C" or the abbreviation	
Enter new principal offices address, if applied	cable:			
(Principal office address MUST BE A STREE	ST ADDRESS)		<del>57 53</del>	
			32 52 Cm	
Enter new mailing address, if applicable:			17)	
(Mailing address MAY BE A POST OFFICE	ROY		711	
The state of the s		<u> </u>	12. =1	
	<del></del>		<del>- 12 - 12 - 1</del>	
B. If amending the registered agent and	or registered office address	on our records, enter th	e name of the new	
registered agent and/or the new registered of		,		
	. <u>.</u>			
Name of New Registered Agent:	James Fratangelo			
New Registered Office Address:	45 Prospect Drive			
TION TISSUPPLIES OFFICE THIN AND	Enter Florida street address			
	Miami	. Florida	33	
	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 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

Page 1 of 3

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = M AMBR = A	lanager uthorized Member		
<u>Title</u>	Name	Address	Type of Action
MGR	James Fratangelo	45 Prospect Drive	Add
		Miami, FL 33133	Remove
•			Remove
			Remove
···			Add S
·			······································
<del></del>			Add
			Kemove
<del></del>			Add
		<del></del>	Remove

D. If am	ending any other information, enter change(s) here: (Attach additional s	heets, if necessary.)
E. Effect (If an effe Dated	tive date, if other than the date of filing:	(optional) ys after filing.) (605.0207 (3)(b)
	Signature of a member or authorized representative of a	
•	Lisa Gindling	
	Typed or printed name of signee  Page 3 of 3	LANGE LANGE
	Filing Fee: \$25.00	