L01000014955

(Req	uestor's Name)	
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(City/	State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Busi	ness Entity Nar	ne)
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Certified Copies	Certificates	of Status
Special Instructions to Fi	ling Officer	
Special Instructions to Filing Officer:		
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COVER LETTER

TO: Registration Sec Division of Corp				
SUBJECT. Creative I	rrigation Concepts, LLC			
	(Name of Limit	ed Liability Company)	* · · · · · · · · · · · · · · · · · · ·	
The enclosed Articles of A	mendment and fee(s) are subm	nitted for filing.		
Please return all correspon	dence concerning this matter to	o the following:		
	Chris Theberge			
		(Name of Person)		
Creative Irrigation Concepts, LLC				
		(Firm/Company)		
	PO Box 111208			
		(Address)		
Naples, Florida 34108				
(City/State and Zip Code)				
For further information concerning this matter, please call:				
Chris Theberge	 	at (239) 449-8536		
(Name of	Person)	(Area Code & Daytime T	elephone Number)	
Enclosed is a check for the	e following amount:			
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	

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**

FILED 08 JAN -2 AM 10: 38 SECRETARY OF STATE TALLAHASSEE FLORIDA

Creative Irrigation Concepts	s, LLC			
(<u>Name of the Limited</u> (A	Liability Company as it now Florida Limited Liability Con	appears on our records.) pany)		
The Articles of Organization for this Limited Li	ability Company were filed of	on February 9, 2007 and assigned		
Florida document number <u>L07000014955</u>	•			
This amendment is submitted to amend the follo	owing:			
A. If amending name, enter the new name of	the limited liability compa	ny here:		
				
The new name must be distinguishable and end with "L.L.C."	the words "Limited Liability	Company," the designation "LLC" or the abbreviation		
B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:				
Name of New Registered Agent:				
New Registered Office Address:	7601 Citrus Hill Lane			
		(Enter Florida street address)		
	Naples	, Florida 34109		
	(City)	(Zip Code)		
New Degistered Agent's Signature if changing D	esistaned A			

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 <u>Title</u> <u>Name</u> **Address Type of Action** MGRM Tom E Roxby 1060 20th Avenue Northeast ☐ Add Naples, Florida 34120 **✓** Remove MGRM Lynn M Larsen ✓ Add 7601 Citrus Hill Lane Naples, Florida 34109 ☐ Remove Add Remove \neg Add Remove Add Remove Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated 12 - 28 Signature of a member or authorized representative of a member Chris Theberge Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00