L07000019250

Office Use Only



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08/24/20--01021--034 **25.00



10/10/20

COVER LETTER

TO: Registration Division of C			
	ADING LLC - Name change		
SUBJECT:	Name of Lin	nited Liability Company	
The enclosed Articles	of Amendment and fee(s) are sub	omitted for filing.	
Please return all corres	pondence concerning this matter	to the following:	
	Pablo Bregolat		
		Name of Person	·
		Firm/Company	782
	1109 S 33rd Street		2020 AUG 24 PH 2: 18 THE STATE
		Address	22 [
	Ft. Pierce, FL 34947		NIG 24 PH
		City/State and Zip Code	1.52 53
	info@bregocorp.com E-mail address: (to be used for future annual report notifi	ication) RR
For further information	concerning this matter, please or	•	<i>y</i>
Pablo Bregolat		772 979-4332	
Name of Person		at ()	Telephone Number
Enclosed is a check for	the following amount:		
■ \$25.00 Filing Fec	☐ \$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 Addre Registration Division of O P.O. Box 633 Tallahassee,	Section Corporations 27	Street Address: Registration Sector Division of Corp The Centre of Ta 2415 N. Monroe Tallahassee, FL	orations Illahassee Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

H20 TRADING LLC		
(Name of the Limited (A	Liability Company as it now appears on our record Florida Limited Liability Company)	<u>s.</u>)
The Articles of Organization for this Limited Liab	ility Company were filed on 02/20/2007	and assigned
Florida document number L07000019250		
This amendment is submitted to amend the follow	ing:	
A. If amending name, enter the new name of the	e limited liability company here:	
BREGO RECYCLING SERVICES LLC		
The new name must be distinguishable and contain the word	s "Limited Liability Company," the designation "LLC"	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable		
(Principal office address MUST BE A STREET		. ~2
		728 F
		6 1
Enter new mailing address, if applicable:		2 厂
(Mailing address MAY BE A POST OFFICE BO	<u></u>	Eno P
		72 72
		223
B. If amending the registered agent and/or regis	stered office address on our records, enter t	he name of the new registere
agent and/or the new registered office address h	<u>ere</u> :	
Name of New Parison 1 A		
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
_	, Flor	ida
	City	Zin 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

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager

AMBR = Authorized Member **Type of Action** Address Title Name □Remove __ Change Remove □ Remove Remove _ Change □Add ____ □Remove _____ 🗆 Add _ 🗆 Remove __ Change □Add __ 🗆 Remove _____ Change

				
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ote: If the date inserted in this blocument's effective date on the Do	t be specific and cannot be prior to date ock does not meet the applicable sta	of filing or more than 90 days after atutory filing requirements, this	filing.) Pur date will	not be listed
is filed.	s date, but not an effective time, at	12:01 a.m. on the earlier of: (b)	The 90t	h day after th
	2020			
August 21st				
ated August 21st	7			

Filing Fee: \$25.00