

L08000091104

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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MAIL

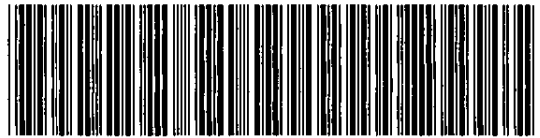
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2008 DEC -4 AM 10:58

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C. LEWIS

NOV 13 2008

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Atlas Water Solutions, LLC
(Name of Limited Liability Company)

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Donald R. Mudd

(Name of Person)

Atlas Water Solutions, LLC

(Firm/Company)

4220 Whidden Blvd., Ste B

(Address)

Port Charlotte, FL 33980

(City/State and Zip Code)

For further information concerning this matter, please call:

Donald R. Mudd

(Name of Person)

at (941) 626-9038

(Area Code & Daytime Telephone Number)

Enclosed is a check for the 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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 13, 2008

ATLAS WATER SOLUTIONS, LLC
DONALD R MUDD
4220 WHIDDEN BLVD., STE. B
PORT CHARLOTTE, FL 33980

SUBJECT: ATLAS WATER SOLUTIONS LLC
Ref. Number: L08000091104

We have received your document for ATLAS WATER SOLUTIONS LLC and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must be signed by a member or an authorized representative of a member.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6047.

Carolyn Lewis
Regulatory Specialist II

Letter Number: 308A00057078

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Atlas Water Solutions, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on September 25, 2008 and assigned
Florida document number L08000091104.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and end with the words "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 ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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:

(Enter Florida street address)

(City)

Florida

(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:

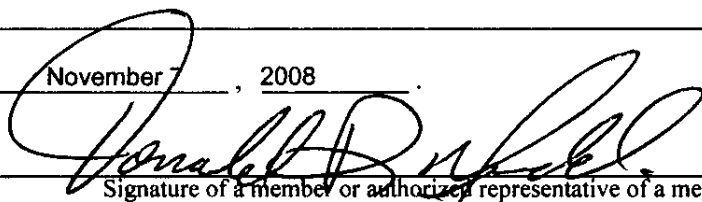
MGR = Manager

MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Joshua D. Lapidis	3793 Albacete Circle Punta Gorda, FL 33950	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGR	Patricia A. Starr	3506 Jernigan Street Port Charlotte, FL 33948	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Dated November 7, 2008



Signature of a member or authorized representative of a member

Donald R. Mudd

Typed or printed name of signee

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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