

-	
(Requestor's Name)	
(Address)	
(Address)	
,	•
(City (Chaha 17) - (Dhana a 4	
(City/State/Zip/Phone #	)
PICK-UP WAIT	MAIL
(Business Entity Name)	····
,	
(Document Number)	
(Document Number)	
Certified Copies Certificates of	Status
Special Instructions to Filing Officer:	······
openial metadeante to 1 mily officer.	
	•
,	

Office Use Only

G. MCLEOD

FEB 16 2009

**EXAMINER** 



500143452065

02/13/09--01026--003 \*\*55.00

09 FEB 13 PH 3: 45

## **COVER LETTER**

Division of Corpo	rations			
SUBJECT: Aqua C	Ckan Pool Se (Name of Limit	ted Liability Company)	Key West LLC	
The enclosed Articles of An	nendment and fee(s) are subn	nitted for filing.		
Please return all correspond	ence concerning this matter t	to the following:		
	Brand	On Kocis (Name of Person)		
	Aqua Clean Pool	Service of (Firm/Company)	Key West LLC	
	2801 Flag	gler Ase (Address)		
	Key West	FL 33648 (City/State and Zip Code)		
For further information con-	cerning this matter, please ca	A1:		
Brandon (Name of F	Kocis Person)	at ( <u>305</u> ) 74 (Area Code d	27 - 6265 & 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 e	Certificate of S Certified Copy (additional cop	Status &

## - MAILING ADDRESS:

TO:

Registration Section

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**

Agua Clean Pool Servi	u o	f key	Wes	+ LL	.c	_	
Aqua Clean Pool Service (Name of the Limited Liabile) (A Florida	lity Compan la Limited Li	y as it now appart	pears on ou	<u>ir records.</u> )		-	
The Articles of Organization for this Limited Liability Florida document number <u>L0900011937</u>	y Company				and	l assig	ned
This amendment is submitted to amend the following:	:						
A. If amending name, enter the new name of the li							
H20 Pool Service of Key The new name must be distinguishable and end with the	West	LLC.	mamı " the	decianation	"IC" or	the abl	
"L.L.C."							
Enter new principal offices address, if applicable:		2801 Key V	Flag	ler A	se.		. 0
(Principal office address MUST BE A STREET AD	DRESS)	Key V	Nest	FL 3	33040	90	IVSE IVSE
·						<u> </u>	<u> </u>
Enter new mailing address, if applicable:		2801 Key 1	Flag	ler A.	رد	 ယ	
(Mailing address MAY BE A POST OFFICE BOX)		Key 1	Nest'	FL	33040	≖ <del>نب</del>	
		-				5	<u> </u>
B. If amending the registered agent and/or reg registered agent and/or the new registered office a			n our rec	cords, <u>ente</u>	r the nan	ne of	the new
		n Koci					<del></del>
New Registered Office Address: 25	801 F1	agler Av t (City)	e (Enter Flo	orida street	address)		<del></del>
Ł	for labes	4	,	Florida	23°C4	40	
	701 0003	(City)		_, FIUTIQA	(Zip	Code)	
New Registered Agent's Signature, if changing Registe							

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> **Type of Action** MGR Brandon Kocis ☐ Remove ☐ Add Remove Add Remove ☐ Add Remove Add 🗖 Remove Add 🗂 Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated February 10 Signature of a member or authorized representative of a member Brandon Kocis
Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00