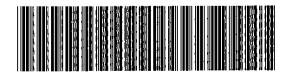
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(Requestor's Name)					
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Special Instructions to Filing Officer:					

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EXAMINER



INFINITY WATER COMPANY, LLC

TASTE THE DIFFERENCE!

P.O. BOX 12911 FT. PIERCE, FL 34979 1-866-425-0332 772-408-8294 - fax infinitywatercompany@gmail.com www.infinitywatercompany.com

September 19, 2011

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

RE: Articles of Amendment

Dear Sir/Madam:

Enclosed please find Articles of Amendment amending managers for Infinity Water Company, LLC, together with the filing fee of \$25.00

Regards

Brian Laskosky

Infinity Water Company, LLC

Enclosures

SECULE TERY OF STATE

COVER LETTER

TO:

Registration Section

Division of C	orporations			
CHRECT.	INFINITY WA	TER COMPANY, L	I C	
SUBJECT:		ited Liability Company		
The enclosed Articles of	of Amendment and fee(s) are su	bmitted for filing.		
Please return all corresp	oondence concerning this matte	r to the following:		
		Brian Laskosky		
		Name of Person		
	Infir	nity Water Company, L	LC	
		Firm/Company		•
		P.O. Box 12911		
		Address		
		Ft. Pierce, FL 34979		2011 SEP 23 SECRETARN TALLLAHASSI
		City/State and Zip Code		SEP 23 RE DARY NHASSE
	infinity	watercompany@gmail to be used for future annual repo	l.com	88 23
For further information	concerning this matter, please	•	at notification;	AH IO 45 COF STATE EE. FLORID
Bi	rian Laskosky	at (772)	828-2255	3 5
Name	of Person	Area Code &	Daytime Telephone Number	
Enclosed is a check for	the following amount:			
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is en	nclosed) Certified	te of Status &

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

Infinity	Water Comp	any, UC	<u>د.</u>	
(<u>Name of the Limited Liability</u> (A Florida I	Company as it now appears on Limited Liability Company)	our records.)		
The Articles of Organization for this Limited Liability C Florida document number 109 0003470	Company were filed on 440	7-09 an	d as:	
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limit	ited liability company here:			
The new name must be distinguishable and end with the wor "L.L.C."	ds "Limited Liability Company,"	the designation "LLC" or	the abb	
Enter new principal offices address, if applicable:				
(Principal office address MUST BE A STREET ADDR	(ESS)	Pe	골	
		<u> </u>	S	
		ASS	J 23	
Enter new mailing address, if applicable:	·····	m K	200	
(Mailing address MAY BE A POST OFFICE BOX)				
	***************************************		<u> </u>	
B. If amending the registered agent and/or regist	ared affice address on our	porter the par	en of the	
registered agent and/or the new registered office addr	ress here:	records, enter the nam	ne or the	
Name of New Registered Agent:				
New Registered Office Address:				
	Enter Florida street address			
		, Florida		
	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 a accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document i 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
MGR	Suzanne Laskosky	148 NE Twylite Terrace Port St. Lucie, FL. 34983	Add Remove
			Add Remove
			Add Remove
			Add Remove
	. 		AddRemove
	<u> </u>		ZIIII Ademove Z
D. If amen —	ding any other information, enter ch	nange(s) here: (Attach additional sheets, if necessar	တ္ဆည္သ
_			<u> </u>
Dated	,	2011	
		mber or authorized representative of a member	
	T.	yped or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00