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SECRETARY OF STATE
ALLAHASSEE, FLORIDA

J. BRYAN

JAN 14 2011

EXAMINER

ARTICLES **OF** AMENDMENT TO ARTICLES OF ORGANIZATION OF

FRESH WATEL VALLEY

(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 Lie	ability Company were filed on Lect	n be 02,2010 and assigned
Florida document number <u>L10000 12</u>	3837	
This amendment is submitted to amend the follo	,	THE
A. If amending name, enter the new name of	the limited liability company here:	SSEE. BY
The new name must be distinguishable and end with "L.L.C."	n the words "Limited Liability Company,"	the designation "LLC" or the abb eviation
Enter new principal offices address, if applica	ıble:	
(Principal office address MUST BE A STREE)	T ADDRESS)	
Enter new mailing address, if applicable:	. ————————————————————————————————————	
(Mailing address MAY BE A POST OFFICE L	<u></u>	
B. If amending the registered agent and/o registered agent and/or the new registered off		records, <u>enter the name of the new</u>
Name of New Registered Agent:		
New Registered Office Address:		
-	Enter F	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 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: GR = Manager MGRM = Managing Member **Type of Action Address Title Name** EVA WISSE Remove ☐ Add ☐ Remove Add Remove Add D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

of a member or authorized representative of a member

Typed or printed name of signee

Dated December 18 2010, FORTLANDERDALE, FL.

Page 2 of 2

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