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(Requestor's Name)	
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DEC 19 2011

EXAMINER

COVER LETTER

Division of Co	rporations				
SUBJECT:	H2O0	EAN II, LLC	•		
Sobsect.	- -	ted Liability Company			
The enclosed Articles of	f Amendment and fee(s) are sub	mitted for filing.			
Please return all corresp	ondence concerning this matter	to the following:			
		GERI KOLOS			
		Name of Person			
	·	H2OCEAN II, LLC			
	703	8 SW JACK JAMES D	R		
		Address		4	•
	STUART, FL 34997 City/State and Zip Code		DEC CRET		
	CE			TAR ASS	
•	E-mail address; (t	RI@H2OCEAN.COM o be used for future annual report	rt notification)	PA PA PA	
For further information of	concerning this matter, please c	all:		င္ပိုင္သ	
				25 25 25 25 25 25 25 25 25 25 25 25 25 2	
_ `	ERI KOLOS of Person	at (954)	729-6381 Daytime Telephone Number		
Name (or Person	Area Code & L	Daytime Telephone Number		
Enclosed is a check for t	the following amount:				
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is end		te of Status &	
				al copy is enclos	ed)

MAILING ADDRESS:

Registration Section

TO:

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

H20	OCEAN II, LLC		
(<u>Name of the Limited Liabilit</u> (A Florida	y Company as it now appea Limited Liability Company)	rs on our records.)	
The Articles of Organization for this Limited Liability (Company were filed on	12/28/2010	and assigned
Florida document numberL10000131764	·		
This amendment is submitted to amend the following:	•		
A. If amending name, <u>enter the new name of the lim</u>	nited liability company he	<u>re</u> :	
The new name must be distinguishable and end with the wo	ords "Limited Liability Comp	any," the designation "I	LC" or the abbreviation
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADD	RESS)		
		HĒ XX	
Enter new mailing address, if applicable:		SSE E	6
(Mailing address MAY BE A POST OFFICE BOX)			≆ Ⅲ
		E' 05 95₹	∾ O
	• ••	E E	9
B. If amending the registered agent and/or registered agent and/or the new registered office add		our records, enter t	he name of the ne
Name of New Projectored Agents			
Name of New Registered Agent:			
New Registered Office Address:	F	nter Florida street add	ress
	IJ,		
	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 = MGRM Title	i = Managing Member Name	Address	Tyne of Action
MGRM		7938 SW JACK JAMES DR STUART, FL 34997	Add 7 Remove
/ MGRM	PROJECT BLUE GREEN ENTERPRISES LLLP	7938 SW JACK JAMES DR STUART, FL. 34997	Add Remove
	<u></u>		Add Remove
	· · · · · · · · · · · · · · · · · · ·		Add Remove
			Add Remove
			Add Remove
D. If ame	anding any other information, enter change(s)	here: (Attach additional sheets, if necessary.)	
-	This amendment corrects an inadverter		==
- -	Managing Member. The correct name i	ASSEE, FLOR	FILED
Dated	DECEMBER 1 , 2011	-industrial	ğ
		uthorized representative of a member	
		KOLOS, CFO rinted name of signee	

Page 2 of 2

Filing Fee: \$25.00