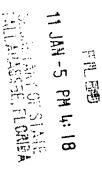


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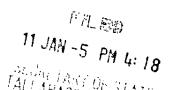
EXAMINER
JAN 6 2011

COVER LETTER

	on Section f Corporations					
SUBJECT:	; Agua N	Minerals USA LLC				
	Name of L	imited Liability Company				
	\$ 4	,				
The enclosed Articl	es of Amendment and fee(s) are	submitted for filing.				
	respondence concerning this ma					
		Abe Warshenbrot				
	,	Name of Person				
		Cone, Walsh & Co				
, .		Firm/Company				
		00 Fairview Rd, Suite 1205				
		Address				
	g 1	Charlotte, NC 28210				
		City/State and Zip Code				
and the	10	abew@taxsaversinc.com				
	E-mail addres	s: (to be used for future annual report notification)				
For further informat	ion concerning this matter, pleas	se call:				
,	Abe Warshenbrot	at (704) 552-5599				
Na	ame of Person	Area Code & Daytime Telephone Number				
Enclosed is a check	for the following amount:					
▼ \$25.00 Filing Fee	e \$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & \$60.00 Filing Fee, Certified Copy (additional copy is enclosed) \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)				
	(
Re Di P.G	AILING ADDRESS: egistration Section vision of Corporations O. Box 6327 Illahassee, 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

Aqua Minerals USA LLC



(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears .iability Company)	s on our records.)		674 E
The Articles of Organization for this Limited Liability Company Florida document number <u>L1100000650</u>	were filed on	01/03/2011	and assigned	
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liab	ility company here	:		
Aqua Mineral	USa LLC			
The new name must be distinguishable and end with the words "Limi "L.L.C."	ted Liability Compan	y," the designation "L	LC" or the abbreviat	ion
Enter new principal offices address, if applicable:	4044 West Lake Mary Blvd. Ste 104-325			·-
(Principal office address MUST BE A STREET ADDRESS)	Lake Mary, FI	32746		_
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)				<u>.</u>
B. If amending the registered agent and/or registered off registered agent and/or the new registered office address here		ır records, <u>enter t</u>	he name of the no	- <u>ew</u>
Name of New Registered Agent:				-
New Registered Office Address:	Ente	r Florida street addi	ress	-
·	- C:	, Florida		-
	Citv		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 amending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = MGRM	Mana = Mai	ger naging N	/Iemb	er			
<u>Title</u>		<u>Name</u>	;			Address	Type of Action
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	-			·			Remove
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D. If amo	ending	g any oth	ier inf	formation, ente	er change(s	s) here: (Attach additional sheets, if necessary.)	
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Dated				01/04	2011	·	
		Cu	at	01/04, Zwelen	27		
		<u> </u>	<u></u>	Signature of a	member or	authorized representative of a member	
				Ana	Typed or	er, Managing Member printed name of signee	

Page 2 of 2

Filing Fee: \$25.00