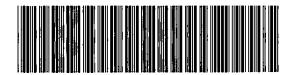
L11000067859

| (Re | equestor's Name) | | | | |
|---|--------------------|-----------------|--|--|--|
| (Address) | | | | | |
| (Address) | | | | | |
| (Cit | ty/State/Zip/Phone | : #) | | | |
| PICK-UP | ☐ WAIT | MAIL | | | |
| (Bu | siness Entity Nan | ne) | | | |
| (Document Number) | | | | | |
| Certified Copies | | of Status | | | |
| Special Instructions to Filing Officer: | | | | | |
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Office Use Only



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COVER LETTER

| TO: | Registration S Division of Co | | μ. | | | |
|------------------------------|--------------------------------------|--|--|---|--|--|
| SUBJI | CT: | Seminole | Fire Water, LLC | | | |
| 5020 | | | | | | |
| The en | closed Articles of | Amendment and fee(s) are sul | omitted for filing. | | | |
| Please | return all correspo | ondence concerning this matter | to the following: | | | |
| | | Logan York or Ashley Treise Name of Person | | | | |
| | Seminole Fire Water Restoration, LLC | | | | | |
| | Firm/Company | | | | | |
| 400 Capital Circle SE #18221 | | | | | | |
| | | | | | | |
| | | | Allahassee, FL 32301 City/State and Zip Code | | | |
| | | seminole | ecarpetcleaning@yahoo.co | om Footion | | |
| For fur | ther information of | concerning this matter, please of | · | incadoli) | | |
| • | Logan Yo | ork or Ashley Treise | at (850) | 222-5326 | | |
| , | Name o | f Person | | ne Telephone Number | | |
| Enclos | ed is a check for t | he following amount: | | | | |
| \$25 | .00 Fiting Fee | \$30.00 Filing Fee & Certificate of Status | □\$55.00 Filing Fee & Certified Copy (additional copy is enclose | \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) | | |
| | Registr Divisio P.O. B | ING ADDRESS: ration Section on of Corporations ox 6327 assee, FL 32314 | STREET/COUR Registration Secti Division of Corpo Clifton Building 2661 Executive C Taliahassee, FL 3: | on orations enter Circle | | |

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

THICEU
SECRETARY OF STATE
DIVISION OF CORPORATIONS

11 JUL 25 PM 1:53

| Seminole Fire | Water, LLC | | | | |
|---|--|-----------------------------|-------------------------|--|--|
| (Name of the Limited Liability Compa (A Florida Limited I | ny as it now appea liability Company) | rs on our records.) | | | |
| ` | | | | | |
| The Articles of Organization for this Limited Liability Company | were filed on | 06/10/2011 | and assigned | | |
| Florida document number L11000067859 . | | | | | |
| | | | | | |
| This amendment is submitted to amend the following: | | | • | | |
| A. If amending name, enter the new name of the limited liab | ility company he | re: | | | |
| Seminole Fire Water | | | | | |
| The new name must be distinguishable and end with the words "Limi | | | LC" or the abbreviation | | |
| "L.L.C." | | | | | |
| Enter new principal offices address, if applicable: | principal offices address, if applicable: 400 Capital Circle SE #18221 | | | | |
| (Principal office address MUST BE A STREET ADDRESS) | Tallahassee, | Tallahassee, FL 32301 | | | |
| | | | | | |
| | | | | | |
| ter new mailing address, if applicable: 400 Capital Circle SE #18221 | | | | | |
| (Mailing address MAY BE A POST OFFICE BOX) | Tallahassee, FL 32301 | | | | |
| | | | | | |
| | | | N | | |
| B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here | | our records, <u>enter t</u> | ne name of the new | | |
| | | | | | |
| Name of New Registered Agent: | | | | | |
| | | | | | |
| New Registered Office Address: | New Registered Office Address: Enter Florida street address | | | | |
| | | | | | |
| | 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 = Manager MGRM = Managing Member **Type of Action** <u>Title</u> <u>Name</u> <u>Address</u> ☐ Add Remove 🔲 Add Remove ∏ Remove ☐ Add Remove □Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) July 21 2011 Signature of a member of authorized representative of a member Logan M. York

Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00