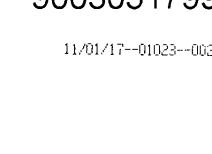
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(Ke	questor's Name)	
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Certified Copies	Certificates	of Status
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Office Use Only





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K. SALY NOV - 2 2017

COVER LETTER

TO: Registration Section Division of Corp		,	
SUBJECT:	Water Mil	l Events, LLC	
	Name of Limi	ited Liability Company	
The enclosed Articles of A	mendment and fee(s) are sub	mitted for filing.	
Please return all correspon	dence concerning this matter	to the following:	
	Thuma	S DOWD	
	Water	S DOWD Name of Person Mill EVents, Leil Firm/Company	C
			4 C
	Fort	VW 12th Ave # 30. Address Landsvolale, FL 3	3309
	N/ 1/4	City/State and Zip Code to be used for future annual report notifications	
For further information cor	ncerning this matter, please ca	ill:	·
Thomas	DOWD	at (954) 734-3	5710
Name of I	Person	Area Code Daytime T	elephone Number
Enclosed is a check for the	following amount:		
\$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

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		2012	
Water Mi	11 Event	s, LLC	2017	MOV -1 FR 4:28
(Name of the Limited (A	Liability Company Florida Limited Lia	as it now appears on bility Company)	our records.)	
The Articles of Organization for this Limited Liab Florida document number 11000 73	oility Company w	Ć	1/27/2011	and assigned
This amendment is submitted to amend the follow	ring:			
A. If amending name, enter the new name of the	he limited liabili	ty company here:		
The new name must be distinguishable and contain the word	ds "Limited Liability	Company," the design	nation "LLC" or the ab	breviation "L.L.C."
Enter new principal offices address, if applicab (Principal office address MUST BE A STREET)		5600 Ft La	NW 12th Av	1 #304 ,FL 33309
Enter new mailing address, if applicable:				
Mailing address MAY BE A POST OFFICE BO	<u>0X)</u>			
B. If amending the registered agent and/or registered agent and/or the new registered offic		ce address on ou	ır records, <u>enter</u>	the name of the new
Name of New Registered Agent:	Tho	mas P	Lwa	
New Registered Office Address:		Enter Florida :	street address	
			, Flor i da	
		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 605. 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 Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records: MGR = Manager AMBR = Authorized Member **Title** Name | **Address Type of Action** DOWD Thurnes ☐ Change CESAR LIVERA _□ Change □ Add ____ □ **Re**move . ☐ Remove ☐ Change □ Add ☐ Remove ☐ Change

□ Add

☐ Remove

_□ Change

lf am	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
	Thumas DOWD & CESAR Rivera
	SOLD houter Mill Events, LC
	to Kyle Brewn of Lone Stake Bloom
	We no longer have any physical or Francial or mongerial interest in Water Mill Events, LCC
	Please somere our Mamer, =
	75 P. 29
(If an e Note:	tive date, if other than the date of filing: 5/36/3017 (optional) ffective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (at If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the ment's effective date on the Department of State's records.
	ecord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: e 90th day after the record is filed.
Datec	
	Signature of a member or authorized representative of a member
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00