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Division of Corporations

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From:

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## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN HYDRONIA LLC

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3239628300 From; Meghan Smith

### **COVER LETTER**

TO: Registration Se Division of Cor				
HYDRON SUBJECT:	IA LLC			
Name of Limited Liability Company				
	Amendment and fee(s) are sub-	-		
	Cheyenne Moseley			
Name of Person				
	Legalzoom.com, Inc.			
FirnyCompany				
	101 N. Brand Blvd., 11th Floor			
		Address		
	Glendale, CA 91203			
	rey@hydronia.com	City/State and Zip Code	<del></del>	
	E-mail address: (	to be used for future annual report noth	lication)	
For further information co	oncerning this matter, please co	all:		
Cheyenne Moseley		800 773-0888 e:		
Name of	Person	Area Code Daytime	e Telephone Number	
Enclosed is a check for th	c following amount:			
□ \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	(udd.tional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is encired)	

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Ft. 32314

STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

# ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION

HYDRONIA LLC (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 Liability Company were filed on 07/18/2011 Florida document number L11000082195 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street ackfress \_, 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 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

Page 1 of 3

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager AMBR = Authorized Member Type of Action Title Name Address MGR Gabriel Rodriguez 1B Cooper Rd. \_□ Add Guildford, Florida 33029 UK \_\_\_\_**∑**i Remove AMBR Marina Ribbi 18331 Pines Blvd., No. 160 **⊠** Add Pembroke Pines, Florida 33029 \_\_\_\_ Remove Remove Remove -2 AH 6: 2 M \_\_\_\_\_ D Add ☐ Remove \_D \dd \_\_\_\_ Remove

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Page 3 of 3

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