

L12000077645

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

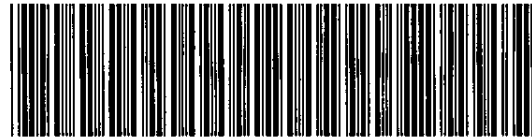
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



500259245285

04/30/14--01015--011 **60.00

FILED
14 APR 30 AM 10:43
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J. Shivers MAY 06 2014

April 10, 2014

Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee FL 32314

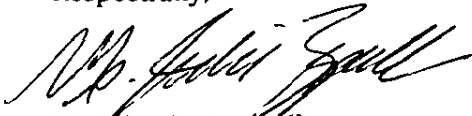
Dear Sir or Madam:

Enclosed is an amendment to E2 Water Solutions, LLC (FL # L12000077645).

If you have any questions, please contact:

Michael Lipparelli
352-589-6161
42000 Mango Street
Eustis FL 32736

Respectfully,

A handwritten signature in black ink, appearing to read "Ms. Julie G. Lipparelli", written over the printed name and address.

Ms. Julie G. Lipparelli
E2 Water Solutions, LLC
42000 Mango Street
Eustis FL 32736

COVER LETTER

**TO: Registration Section
Division of Corporations**

E2 WATER SOLUTIONS, LLC

SUBJECT: _____
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Michael G. Lipparelli

Name of Person

E2 WATER SOLUTIONS, LLC

Firm/Company

42000 Mango Street

Address

Eustis, FL 32736

City/State and Zip Code

michael@e2h2o.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Michael G. Lipparelli

352 589-6161

Name of Person

at (_____) _____

Area Code

Daytime Telephone 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

TO
ARTICLES OF ORGANIZATION
OF

E2 WATER SOLUTIONS, 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 Jun 12, 2012 and assigned
Florida document number L12000077645.

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 "L.L.C."

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)

FILED
14 APR 30 AM 11:43
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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: Michael G. Lipparelli

New Registered Office Address: _____

Enter Florida street address

_____, Florida _____
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.

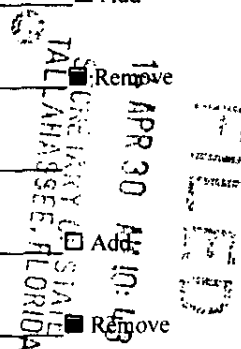

If Changing Registered Agent, Signature of New Registered Agent

Authorized Member being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Michael G. Lipparelli	42000 Mango Street	<input checked="" type="checkbox"/> Add
		Eustis, FL 32736	<input type="checkbox"/> Remove
MGRM	Julie G. Lipparelli	42000 Mango Street	<input type="checkbox"/> Add
		Eustis, FL 32736	<input checked="" type="checkbox"/> Remove
MGRM	Jesse-Leigh E Lipparelli	42000 Mango Street	<input type="checkbox"/> Add
		Eustis, FL 32736	<input checked="" type="checkbox"/> Remove
MGRM	Julia G. Lipparelli	42000 Mango Street	<input type="checkbox"/> Add
		Eustis FL 32736	<input checked="" type="checkbox"/> Remove
AMBR	Julie G. Lipparelli	42000 Mango Street	<input checked="" type="checkbox"/> Add
		Eustis FL 32736	<input type="checkbox"/> Remove
AMBR	Julia Glenn Lipparelli	42000 Mango Street	<input checked="" type="checkbox"/> Add
		Eustis FL 32736	<input type="checkbox"/> Remove
		see attached for additional name change	



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

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
<u>AMBR</u>	<u>Jesse-Leigh E Lipparelli</u>	<u>42000 Mango Street</u> <u>Eustis FL 32736</u>	<u>X</u> Add Remove

FILED
14 APR 30 AM 10:43
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

As a 100% Service-Disabled Veteran, Michael G. Lipparelli will retain

a 51% ownership/managing interest in E2 Water Solutions, LLC.

Julie G. Lipparelli will retain a 29% ownership/managing interest.

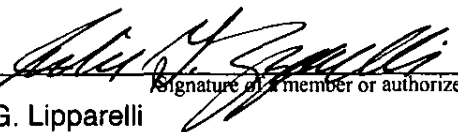
Julia Glenn Lipparelli will retain a 10% ownership/managing interest.

Jesse-Leigh E. Lipparelli will retain a 10% ownership/managing interest.

E. Effective date, if other than the date of filing: _____ (optional)

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated April 10, 2014



Signature of a member or authorized representative of a member

Julie G. Lipparelli

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

FILED
14 APR 30 AM 10:43
SECRETARY OF STATE
TALLAHASSEE, FLORIDA