L/300006715

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COVER LETTER

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Registration Section Division of Corporations

South Florida Water LLC

JECT:			
	Name of Lim	ited Liability Company	
enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
se return all correspo	ondence concerning this matter	to the following:	
	Stephen Masker		
		Name of Person	
	South Florida Water ELC		
		Firm/Company	
	10217 Collar Drive		
	*	Address	
	San Antonio, FL 33576		
		City/State and Zip Code	
	southfloridawater@yahoo.c		
	E-mail address: (to be used for future annual report noti-	lication)
further information e	oncerning this matter, please c	all:	
olyn Masker		727 501-6478	
Name o	f Person	Area Code Daytim	e Telephone Number
losed is a check for t	he following amount:		
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ S60,00 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 Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

South Florida Water LLC

(Name of the Limited Liability Compa (A Florida Limited L	ny as it now appears on our rec Liability Company)	<u>:ords.</u>)
Articles of Organization for this Limited Liability Company ida document number L130000006715	were filed on 12/21/2012	and assigned
s amendment is submitted to amend the following:		
If amending name, enter the new name of the limited liab	ility company here:	
new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "	I.I.C" or the abbreviation "L.L.C."
er new principal offices address, if applicable:		
ncipal office address MUST BE A STREET ADDRESS)		
		7070
		SE T
er new mailing address, if applicable:		
iling address MAY BE A POST OFFICE BOX)	-	23 7 11
If amending the registered agent and/or registered office a nt and/or the new registered office address here:	iddress on our records, <u>en</u>	ter the name of the new register
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street ad	dress
		Florida
	City	Zip Code
Registered Agent's Signature, if changing Registered Agent:		
reby accept the appointment as registered agent and agree visions of all statutes relative to the proper and complete upt the obligations of my position as registered agent as p ug filed to merely reflect a change in the registered office pany has been notified in writing of this change.	performance of my duties provided for in Chapter 60	, and I am familiar with and 95, F.S. Or, if this document is
If Chan	ging Registered Agent, <u>Signatu</u>	re of New Registered Agent

nending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added moved from our records:

R = Manager BR = Authorized Member

) 	<u>Name</u>	Address	Type of Action
	Carolyn Masker	10217 Collar Drive	□∧dd
1/3,/2000	CardynMarka	San Antonio, FL 33576	
			☐ Change
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Signature of a member or authorized representative of a member		Stephen Moster
		Signature of a member or authorized representative of a member

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