L13000014786

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SECRETARY OF STATE

MAR 0 5 2013 D. BRUCE

COVER LETTER

Division of Co	rporations				
SUBJECT: HYDR	OTECH GLOBAL, LLC				
	Name of Limit	ted Liability Company			
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please return all correspondent	ondence concerning this matter	to the following:			
	VETTINI M CTHULLINDO D	regident (Diverter			
	KEVIN M. GUTHARD, P.	Name of Person			
		Firm/Company			
	9452 SW 52nd Cou	rt			
		Address			
	Cooper City, FL	33328			
		City/State and Zip Code			
	kguthard@hydrotec	_		283 283	 .
	E-mail address: (t	o be used for future annual report notification	on)	MAR -	13
For further information	concerning this matter, please ca	all:		R-4 ETAR	
		at (40 PK	m
Name	of Person	Area Code & Daytime Te	lephone Number	PN 1:09 OF STATE E FLORIDA	
					,
Enclosed is a check for t	he following amount:				
□ \$25.00 Filing Fee	XX\$30.00 Filing Fee & Certificate of Status	□\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified (of Status &	losed)

MAILING ADDRESS:

TO:

Registration Section

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

HYDROTECH GLOBAL, LLC			
(Name of the Limited Liability Compa (A Florida Limited)	ny as it now appears on our Liability Company)	records.)	
The Articles of Organization for this Limited Liability Company	were filed on January 2	9, 2013	and assigned
Florida document numberL13000014786			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	oility company here:		
The new name must be distinguishable and end with the words "Lim"L.L.C."	ited Liability Company," the	designation "L1	LC" or the abbreviation
Enter new principal offices address, if applicable:	3304 Sawgrass Vil	lage Circl	Le
(Principal office address MUST BE A STREET ADDRESS)	Ponte Vedra, FL	32082	3 2 T
Enter new mailing address, if applicable:	3304 Sawgrass Vil	lage Circ	NR -4
(Mailing address MAY BE A POST OFFICE BOX)	Ponte Vedra, FL	32082	
B. If amending the registered agent and/or registered or registered agent and/or the new registered office address her		ords, <u>enter t</u> h	
Name of New Registered Agent:	411-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1		
New Registered Office Address:	Enter Flori	ida street addr	ess
		, Florida	
	City	., . 101144	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 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

<u>Title</u>	Name	Address	Type of Action
MGRM	PAIMER HAMILTON, LLC	143 S. Jackson Street	Add
		Elkhorn, WI 53121	X Remove
MGR	KEVIN M. GUTHARD, PRESIDENT AND DIRECTOR	3304 Sawgrass Village Circle Ponte Vedra, FL 32082	X Add .
MGR 	EDWIN P. HILL, V.P. & Director	3304 Sawgrass Village Circle Ponte Vedra, FL 32081	X Add . Remove
MGR	MANFORD J. MARTIN, V.P. & Director	3304 Sawgrass Village Circle Ponte Vedra, FL 32082	X Add
MGR	JOHN G. GARDNER, Director	3304 Sawgrass Village Circle Ponte Vedra, FL 32082	TILEDE SECRETARY OF STATE
			Add
			Remove

Dated 2-37-3 Signature of a member or authorized representative of a member KEVIN M. GUTHARD, President and Director). If amend	ing any other information, enter change(s) here: (Attach additional sheets, if necessary.)
Signature of a member or authorized representative of a member		
Signature of a member or authorized representative of a member		
Signature of a member or authorized representative of a member		
Signature of a member or authorized representative of a member		
Signature of a member or authorized representative of a member		
\ /	ated <u></u>	27-13
\ /		
KEVIN M. GUTHARD, President and Director		Signature of a member or authorized representative of a member
Typed or printed name of signee		KEVIN M. GUTHARD, President and Director

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Filing Fee: \$25.00

FILED
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