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COVER LETTER

SUBJECT: COX	Iwater Enter	prison LLC		
	Name of Limit	ed Liability Company		
The enclosed Articles of A	mendment and fee(s) are subr	mitted for filing.		
Please return all correspon	dence concerning this matter t	to the following:		
	- Larry	Eric Cooley Name of Person		
	Cold water	Enterprises, LL	<u> </u>	
	2812 Go	rdonland Rd Address		
	Milton	FL 32570 City/State and Zip Code		
	E-mail address: (to	be used to future annual report notification).com	
For further information co	ncerning this matter, please ca	all:		
Evic (Cooley Person	at (860) 449 - S Area Code & Daytime Te	sus	÷.
Enclosed is a check for the	e following amount:			12
\$25.00 Filing Fee	□\$30.00 Filing Fee & Certificate of Status	□\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy (additional copy is englosed)	J.

MAILING ADDRESS:

Registration Section
Division of Corporations

TO:

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**

Coldwater Entern	rises LLC	
(Name of the Limited Liability Compan (A Florida Limited Li	y as it now appears on our ability Company)	records.)
The Articles of Organization for this Limited Liability Company of Florida document number <u>21300144119</u> .	were filed on 1011	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabi	lity company here:	
The new name must be distinguishable and end with the words "Limit "L.L.C."	ed Liability Company," the	designation "LLC" or the abbreviation
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 off registered agent and/or the new registered office address here		ords, enter the name of the new
Name of New Registered Agent:		20 20
New Registered Office Address:	Enter Flor	ida 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 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 Changing Registered Agent, Signature of New Registered Agent

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		pe of Action
MGRM	Michael James Hinote	2812 Gordon Land	Pd	Add
		2812 Gordon Land Nilton, FL 32570		Remove
				Add
				Remove
				_
				Add
				Remove
				Add
				Remove
			###***********************************	S
				Add
			TRIDA	Remove
				Add
				Remove

. If amending any oth	er information, enter change(s) here: (Attach additional sheets, if necessary.)
3 · · · · · · · · · · · · · · · · · · ·	
•	

ated October	- 23, <u>2013</u> .
	Ly En Cooly
	Signature of a member or authorized representative of a member
	Horry Eric Cooley Typed or printed name of signee
	Typed or printed name of signee
	Page 3 of 3

Filing Fee: \$25.00

13 OCT 28 KHII: 67