Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN **VOLAR WATER COMPANY LLC**

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Corporate Filing Menu

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TO:

COVER LETTER

TO:	Registration S Division of Co	ection rporations		
SUBJE	VOLAR	WATER COMPANY LLC		
00000	· · · · · · · · · · · · · · · · · · ·	Name of Lin	nited Liability Company	
The enc	losed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please re	eturn all correspo	ondence concerning this matter	to the following:	
	,	Cheyenne Moseley		
			Name of Person	
		Legalzoom.com, Inc.		
			Firm/Company	
		100 W. Broadway Suite	100	
			Address	
		Glendale, CA 91210		
			City/State and Zip Code	
		danielsmith499@yahoo.c		
For first	san information a		to be used for future annual report notifi	cation)
rot turn	KET IIIIOFIIIALION C	oncerning this matter, please of	BIJ:	
Imelda	Vasquez		323 962-8600 ex	·· · · - -
_	Name o	f Person	Area Code Daytime	Telephone Number
Enclosed	i is a check for th	ne following amount:		
□ \$2 5.	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/COURIER ADDRESS: Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

VOLAR WATER COMPANY LLC		
(Name of the Limited Liability Company of (A Florida Limited Liab	es it now appears on our records.) utity Company)	
The Articles of Organization for this Limited Liability Company we	ere filed on 01/28/2014 and assig	ned
Florida document number L14000014921		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liability	y company here:	
Volar Energy Water Company LLC		
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)	20 -	
	1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	
_	A SE	يوعي.
Enter new mailing address, if applicable:	P I	4 L
(Malling address MAY BE A POST OFFICE BOX)	SE SE	å
	TO B	PT;
-	င်းလ ထိ	
B. If amending the registered agent and/or registered office	e address on our records, enter the name of	the nev
registered agent and/or the new registered office address here:	De la companya de la	
Name of New Registered Agent:		
THE OF THE WINDSHIP OF THE STATE OF THE STAT		
New Registered Office Address:	Enter Florido street address	
	P.Mer Piorico Siree (22274:S	
	, Florida Zip Code	
Many Declarated & continuing the bounder Decision of Acoustic	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

MGR = Manager

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:

AMBR = Authorized Member **Type of Action** <u>Title</u> Name <u>Address</u> GABRIAL GARCIA **AMBR** 18800 NE 29TH AVE. _□ Add AVENTURA, FL 33180 AMBR Joshua Gutierrez 18800 NE 29TH AVE. **⊠** Add AVENTURA, FL 33180 _□ Remove □ Add ☐ Remove □ Add _□ Remove ____ Remove

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ffective date, if other than the date of filing: the effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more the date this document is filed by the Florida Department of State)	(optional) an 90 days after
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SECRETARY OF STATE
WALLAHASSEE, FLORID