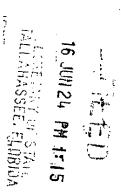
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## **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: Wallace Pool Sewice L.L.C.  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:
Erik Wallace Name of Person
Wallace Pool Service Firm/Company
125 magneta Loop Address
AUDUVNOCAL, FL. 33823 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Enk Wallace at (813) 221-4458  Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
□ \$25.00 Filing Fee Certificate of Status Certified Copy (additional copy is enclosed)  \$60.00 Filing Fee, 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**

Walace	Pool Service, L.C.	
(Name of the Limite	d Liability Company as it now appears on our records.) A Florida Limited Liability Company)	
The Articles of Organization for this Limited Lia	· · · · · · · · · · · · · · · · · · ·	and assigned
Florida document number L14000043	<u>358_</u> .	
This amendment is submitted to amend the follow	wing:	
A. If amending name, enter the new name of	the limited liability company here:	
	e and Pressure Washing, rds "Limited Liability Company," the designation "LLC" or the	a abhreviation "I. C."
•	1 Jolland D. 1 Sautan au	
Enter new principal offices address, if applica		
(Principal office address MUST BE A STREET	0 1 10 1	<u>2007</u>
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE B	D 0 D - 1 2111	ce and Pressure Wash
IMMUNES MAT DE A FOST OFFICE D	Auburndale, Fl	.,33823
B. If amending the registered agent and/or registered agent and/or the new registered offi	r registered office address on our records, <u>ent</u> <u>ce address here</u> :	er the name of the new
Name of New Registered Agent:	Enk wallace	16 J
New Registered Office Address:	125 Magneta Loop Enter Florida street address	NASSER 2
	Abyrdale, Florida	33823 III
New Registered Agent's Signature, if changing Re	City gistered Agent:	Zip Code

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

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

MGR = M $AMBR = A$	anager uthorized Member		
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If an effective da	ate is listed, the date m late inserted in this l ffective date on the	oust be specific and can block does not mee	t the applicable	te of filing or more the statutory filing req	an 90 days after filin	g.) Eursuani	te 605.03 be listed	207 (3)( as the
Note: If the document's ef		nd effective dat	e, but not an	effective time	, at 12:01 a.m	. on the	earlier	of:
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the record s The 90th		ecord is filed.	<u> 2014</u> .					

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Filing Fee: \$25.00