

L14 000061982

Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : RICHARDS & ASSOCIATES, PA.
Account Number : T20110000091
Phone : (305)858-9900
Fax Number : (305)285-0015

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: yrivero@richards-law.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
ART WATER LLC

Certificate of Status	0
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Corporate Filing Menu

Help

ART 2O INC.
A Florida Non-Profit Corporation
2665 SOUTH BAYSHORE DRIVE
SUITE 703
MIAMI, FLORIDA 33133

July 1, 2014

VIA FACSIMILIE

Florida Department of State
Division of Corporations
Clifton Building
2561 Executive Center Circle
Tallahassee, FL 32301

Re: Formation of ART 2O LLC


Dear Sir/Madam:

I am the President of ART 2O Inc., a Florida non-profit corporation which Articles of Incorporation were filed on May 8, 2014, with Document Number N1400004547, Principal Address and Mailing Address at 2665 South Bayshore Drive, Suite 703, Florida 33133, and with an active status with the Division of Corporations of the Florida Department of State.

In my condition as President of ART 2O Inc., I authorize the formation of ART 2O LLC, a Florida limited liability company, with Principal Address and Mailing Address at 2665 South Bayshore Drive, Suite 703, Florida 33133, with World Corporate Services Inc., a Florida corporation, also located at 2665 South Bayshore Drive, Suite 703, Florida 33133, as Registered Agent, and Claudia Lopez and myself as Managers.

If you have any questions, please do not hesitate to contact me.

Sincerely,


Luis F. Jaramillo
President

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: **ART WATER LLC**

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:

YILAN RIVERO

Name of Person

RICHARDS & ASSOCIATES, PA

Firm/Company

2665 SOUTH BAYSHORE DRIVE, SUITE 703

Address

MIAMI, FLORIDA 33133

City/State and Zip Code

YRIVERO@RICHARDS-LAW.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

YILAN RIVERO

Name of Person

at **305 858-9900**

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee

☐ \$30.00 Filing Fee &
Certificate of Status

☐ \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

☐ \$60.00 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**

ART WATER LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on APRIL 16, 2014 and assigned Florida document number L14000061982.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

ART 20 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)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

City, Florida

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

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:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

E. Effective date, if other than the date of filing: _____ (optional)

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated JULY 1, 2014



Signature of a member or authorized representative of a member

LUIS F. JARAMILLO

Typed or printed name of signer

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Filing Fee: \$25.00

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