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(((H14000222645 3)))



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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC

Account Number : 110432003053

Phone Fax Number : (561)694-8107 : (561)828-2262

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

Email	Address:	:		

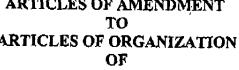
LLC AMND/RESTATE/CORRECT OR M/MG RESIGN SUN CITY POOL SERVICES LLC

Certificate of Status	0
Certified Copy	0
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SEP 24 2014 J. BRUCE

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION



SUN CITY POOL SERVICE	SLLC	
(Name of the Limited Lin (A Flor	bility Company as it now appears on our records Limited Liability Company)	rdt.)
The Articles of Organization for this Limited Liability Florida document number <u>L14000111294</u>	y Company were filed on 07/14/201	4 and assigned
This amendment is submitted to amend the following:	;	
A. If amending name, enter the new name of the li	mited liability company here:	
Modern Pools LLC		
The new name must be distinguishable and end with the words	"Limited Liability Company," the designation "I	LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	·	
(Principal office address MUST BE A STREET AD)	DRESS)	
		20
•		S
Euter new mailing address, if applicable:	,	
(Mailing address MAY BE A POST OFFICE BOX)		<i>ြို့</i> ခု ယ \
		mc 😕 🚺
B. If amending the registered agent and/or re- registered agent and/or the new registered office a		rds, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street add	Dec.
	with the intermediate	· Calad
	City , 1	Florida
	Chy	zip Ciuç

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

Page 1 of 3

H14000222645
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:

uthorized Member		
<u>Name</u>	Address .	Type of Action
		Add
		□ Rетпоче
		Add
		Remove
		□ Add
		□ Remove
		Add 2014 SEP 23
·		23 P
		Add D Remove
		,

000222645 If amending any other information, enter change(s) here: (Attach o	mumorum sizeem, ij riedzistary.
Effective 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 of the date this document is filed by the Florida Department of State)	(optional)
The effective date must be specific, cannot be prior to date of receipt or filed date and o the date this document is filed by the Florida Department of State)	
The effective date must be specific, cannot be prior to date of receipt or filed date and o the date this document is filed by the Florida Department of State)	
	annot be more than 90 days after

Page 3 of 3

Filing Fee: \$25.00

2014 SEP 23 AM II: 45