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D. **SCOTT NOV** 4 2016

## **COVER LETTER**

TO: Registr Division	ation Sec n of Corp	tion orations			
	ie Poolser	vices.com LLC			
SUBJECT:		Name of Limi	ted Liability Company		
The enclosed Ar	ticles of A	amendment and fee(s) are sub-	mitted for filing.		
Please return all	correspon	dence concerning this matter	to the following:		
		Alexander Wilhelm	marin san an a	,	
			Name of Person		
		The Poolservices.com LLC			
	II.	<del>- `</del>	Firm/Company		•
		1774 Scafan Cir			
			Address		TAISE 56
		North Fort Myers / FL 339	903		CRES -
			City/State and Zip Code		DV -3 PV ETARY OF I WHASSEE, F
		info@thepoolservices.com	to be used for future annual	anno et polification)	E G
For further infor	mation cc	oncerning this matter, please ca		eport normation)	FLORID.
Alexander Wilh	nelm			98137	景市 5
	Name of	Person	at () Area Code	Daytime Telephone Number	r
Enclosed is a ch	eck for th	e following amount:			
■ \$25.00 Filin		☐ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enc	Certifica losed) Certified	ate of Status &
	Registra Divisio P.O. Bo	NG ADDRESS: ation Section n of Corporations ox 6327 ssee, FL 32314	Registrat Division Clifton B 2661 Exc	C/COURIER ADDRESS: ion Section of Corporations uilding centive Center Circle see, FL 32301	

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	The Poolservices.com LLC		
•	(Name of the Limited Liability Compan (A Florida Limited Li	y as it now appears on our records.) ability Company)	
	f Organization for this Limited Liability Company vent number L14000177324	were filed on November 14, 2014	and assigned
This amendme	ent is submitted to amend the following:	·	
A. If amendir	ng name, enter the new name of the limited liabil	ity company here:	
The new name m	ust be distinguishable and contain the words "Limited Liabili	ty Company," the designation "LLC" or	the abbreviation "L.L.C."
Enter new pri	ncipal offices address, if applicable:		
(Principal offi	ce address MUST BE A STREET ADDRESS)		
	illing address, if applicable:		SECRET TALLAN
B. If amend	ing the registered agent and/or registered off	ice address on our records, en	ASSERT AS THE NEW OF the new
registered age	nt and/or the new registered office address here	:	DE 1
Name	of New Registered Agent:		
New	Registered Office Address:	Enter Florida street address	
	<del></del>	, Florid	a Zip Code
New Registered	Agent's Signature, if changing Registered Agent:		
provisions of a accept the obj being filed to	pt the appointment as registered agent and agre- all statutes relative to the proper and complete p ligations of my position as registered agent as po merely reflect a change in the registered office of been notified in writing of this change.	performance of my duties, and I rovided for in Chapter 605, F.S.	am familiar with and Or, if this document is

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 = Manager AMBR = Authorized Member

<u>Title</u>	Name	<u>Address</u>	Type of Action
MGR	Alexander Wilhelm	1774 Seafan Cir	<b>⊟</b> Add
		North Fort Myers, FL 33903	Remove
			Change
MGR	Birte Wilhelm	1774 Seafan Cir	<u>=</u> Add
		North Fort Myers, FL 33903	□ Remove
			Change
MGR	Pool-Rific M & R LLC	1774 Seafan Cir	
		North Fort Myers, FL 33903	Remove
			☐ Change
			Add
			□ Remove
			☐ Change
			16 NOV
,			SEE BLORIE
			□ Remove
			Change

If ame	ending any other information, enter c	hange(s) here: (Attaci	h additional sheets, if n	ecessary.)
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-		<u></u>		<del></del>
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Effect	tive date, if other than the date of filin	ıg:	(0	ptional)
it an et Note:	Tective date is listed, the date must be specific an If the date inserted in this block does not	id cannot be prior to date of timeet the applicable statu	tiling or more than 90 days a tory filing requirements,	this date will not be listed as
docun	nent's effective date on the Department of	State's records.		
ne re	cord specifies a delayed effective	date, but not an eff	ective time, at 12:0	1 a.m. on the earlier of
The	e 90th day after the record is filed	•		<b>28 6</b>
		2016		
Dated	31st October	2016		AFIA
				SSE -3
	MILL	4//m		jnο
	Signature of a	i niehober or authorized repr	resentative of a member	TEST -
	Alexander Wilhelm			F: 47 ORIDE

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Filing Fee: \$25.00