14000186499

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K. SALY EXAMINER

MAR 16

COVER LETTER

TO:	Registration Se Division of Cor			
SUBJI		JA INVESTMENTS II, LLC		
вода		Name of Lim	ited Liability Company	
		Amendment and fee(s) are sub	-	
		EVELIN OTANO		
		 	Name of Person	
			Firm/Company	
		960 EAST 29TH STREET	,	
			Address	•
		HIALEAH, FL 33013		
		Onland - Otan - 205@hatmail	City/State and Zip Code	
		OrlandoOtano305@hotmail E-mail address: (to be used for future annual report notifi	ication)
For fu	ther information c	oncerning this matter, please ca	all:	
Orland	lando Otano 786 395-8136			
	Name o	f Person	Area Code Daytime	Telephone Number
Enclos	ed 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)	□ \$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

2016 MAR 14 AM 10: 52

E & O AQUA INVESTMENTS II, 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 12/04/2015 and assigned Florida document number L14000186499

This amendment is submitted to amend the following:

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

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."

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:

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

Enter Florida street address

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>	<u>Name</u>	Address	Type of Action
AMBR	ORLANDO OTANO	960 EAST 29TH STREET	Add
		HIALEAH, FL 33013	□ Remove
			☐ Change
		-	🗖 Add
			Remove PChange
			□Add □ Remove
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	ust be specific and cannot be prior to date of filing of clock does not meet the applicable statutory f	(optional) or more than 90 days after filing.) Pursuant to 605.0207 (3 iling requirements, this date will not be listed as th
the record specifies a delaye) The 90th day after the re		ve time, at 12:01 a.m. on the earlier of:
Dated MARCH 9	2016	

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00