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(Requestor's Name)

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(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

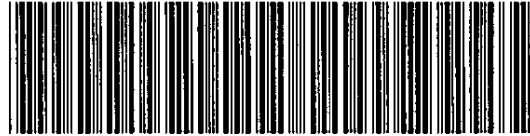
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

AUG 05 2015
J. HARRIS

Maria Martinez-Vilella Law Office

506 Gerona Ave., Coral Gables, FL 33146

786-837-1269

maria@martinezvilella.com

July 29, 2015

VIA AIR MAIL

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

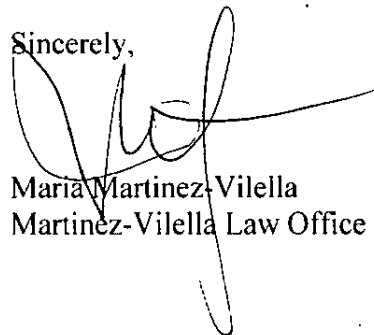
**Re: Articles of Amendment to the Articles of Organization of
Aquapak Systems LLC
L15000120605**

Dear Sir/Madam:

This office represents Aquapak Systems LLC in their corporate matters. Enclosed please find the Articles of Amendment to the Articles of Organization of Aquapak Systems LLC, amending the company's principal offices address and the registered agent's office address due to a typo in the address submitted in original Articles of Organization. In addition, please find the filing fees for a total amount of \$25.00, check number 1455.

Thank you in advance for your attention in this matter. If you have any question please do not hesitate to contact our office.

Sincerely,



Maria Martinez-Vilella
Martinez-Vilella Law Office

Enclosures

cc: Mr. Elpidio González

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Aquapak Systems 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:

Maria Martinez-Vilella, Esq.

Name of Person

Martinez-Vilella Law Office

Firm/Company

506 Gerona Ave.

Address

Coral Gables, FL 33146

City/State and Zip Code

maria@martinezvilella.com

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

For further information concerning this matter, please call:

Maria Martinez-Vilella, Esq.

786 837-1269
at ()

Name of Person

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**

Aquapak Systems 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 July 17, 2015 and assigned Florida document number L15000120605.

This amendment is submitted to amend the following:

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

N/A

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:

14312 SW 163 Street

(Principal office address MUST BE A STREET ADDRESS)

Miami, FL 33177

Enter new mailing address, if applicable:

N/A

(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:

N/A

New Registered Office Address:

14312 SW 163 Street

Enter Florida street address

Miami

Florida 33177

City

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 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>	<u>Address</u>	<u>Type of Action</u>
N/A	N/A	N/A	<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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TALLAHASSEE, FLORIDA

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

N/A

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

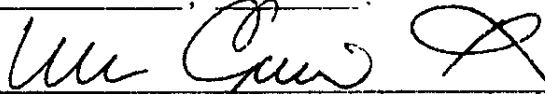
(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:
(b) The 90th day after the record is filed.

Dated July 27, _____

2015



Signature of a member or authorized representative of a member

Elpidio Gonzalez

Typed or printed name of signee

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TALLAHASSEE, FLORIDA