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COVER LETTER

TO: Registration Se Division of Cor				
SUBJECT:	Pro - Aqua Pre Name of Lin	55010 Washing , ited Liability Company	LL(
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please return all correspo	ndence concerning this matter	to the following:		
		Steve Parker Name of Person		
		Pro Aqua Pross Firm/Company	sure washing, LL	C
		1399 Old King Address	s Rd	
		Day 7010 Bca City/State and Zip Code	ch, 32117	
	E-mail address:	parkery, & Liv	e, com	2016
For further information co	oncerning this matter, please c	all:	A TO THE PARTY OF	FEB -11 A
Steve	Parker	at (<u>619</u>)	372-0860	
Name o	E-mail address: oncerning this matter, please of Parker f Person the following amount:	Area Code	Daytime Telephone Number:	ි ව දී 58
Enclosed is a check for th	e following amount:		,,-	
\$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certificate (Certified C	of Status &

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

Fro Aqua Pressure Washing 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
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 "L.L.C."
Enter new principal offices address, if applicable: 1399 old Kings Rd
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Dayrona Beach, FL 32117
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: Sieve Parker
Name of New Registered Agent: New Registered Office Address: 1399 Old Kings Rd
Day Tona Beach Florida \$2117
Day Tona Beach, Florida \$21/7 ² City 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

If Changing Registered Agent, Signature of New Registered Agent

company has been notified in writing of this change.

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 = M $AMBR = A$	lanager .uthorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Heather Love	255 Woodstock CT.	
		ormand Beach, FL, 3217	*/ Remove
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			Change
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etive date, if other than the date of effective date is listed, the date must be speciful. If the date inserted in this block does ment's effective date on the Departmen	ic and cannot be prior to one of meet the applicable	date of filing or more t e statutory filing red	(optional) han 90 days after filing quirements, this date	.) Pursuant	to 605.0 be listed
ecord specifies a delayed effecti e 90th day after the record is fi		in effective time	e, at 12:01 a.m.	on the	earlie
d	<u>, 2016</u>	/			
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Page 3 of 3

Filing Fee: \$25.00