

L1500021120

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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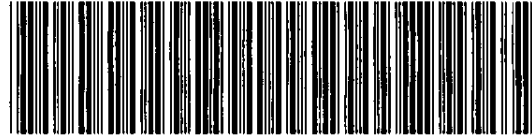
(Business Entity Name)

(Document Number)

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2016 JAN 25 A 10:59

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

JAN 26 2016
CLERK

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: WATERHOUSE RESOURCE GROUP, 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:

LEON BECKFORD
Name of Person

2221 NW. 30 WAY WATERHOUSE RESOURCE GROUP, LLC
Firm/Company

FORT LAUDERDALE, FL
Address

LEON BECKFORD 2916 @ GMAIL.COM
City/State and Zip Code
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

LEON BECKFORD at (954) 909 2823
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

2016 JAN 25 A 10:38
SECRETARY OF STATE
TALLAHASSEE, FL 32301

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**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

WATERHOUSE RESOURCE GROUP 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 _____ and assigned Florida document number L 15000211120.

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: 0

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable: 0

(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:

JAMES RICHARDS

New Registered Office Address:

SAME 2221 NW 30 WAY
Enter Florida street address

SAME FOR LAUDERDALE, Florida
City

33304
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>
AMBR	LEON BECKFORD	2221 NW 30 WAY	<input checked="" type="checkbox"/> Add
		FORT LAUDERDALE, FL 33311	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	JAMES RICHARDS	710 REMINGTON WALK CT	<input type="checkbox"/> Add
		SPRING, TX 77073	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	PEARL ANDERSON POOLE	2221 NW 30 WAY	<input type="checkbox"/> Add
		FORT LAUDERDALE, FL 33311	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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 2018 JAN 25
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2016 JAN 25 A 10:5
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TALLAHASSEE, FLORIDA

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2016 JAN 25 AM 10:59
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

(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)

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 _____, _____

Leon Backford

Signature of a member or authorized representative of a member

Leon Beckford

Typed or printed name of signee