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COVER LETTER

	on Section Corporations					
our man	ECOVIE ENVIRONMENTAL, LLC					
SUBJECT:	Name of Limited Liability Company					
The enclosed Art	es of Amendment and fee(s) are submitted for filing.					
Please return all o	respondence concerning this matter to the following:					
	Humberto E. Ruiz					
	Name of Person					
	Ruiz & Company					
	Firm [*] Company					
	2385 N.W. Executive Center Drive, Suite 100					
	Address					
	Boca Raton, FL 33431					
	City/State and Zip Code humberto@ruizandcompany.com					
	E-mail address: (to be used for future annual report notification)					
For further infor	tion concerning this matter, please call;					
Humberto E. Ru	arne of Person Area Code Daytime Telephone Number					
	ame of Person Area Code Daytime Telephone Number					
Enclosed is a che	for the following amount:					
☐ \$25.00 Filing	ee S30.00 Filing Fee & S55.00 Filing Fee & S60.00 Filing Fee, Certificate of Status Certified Copy Certificate of Status (additional copy is enclosed) Certified Copy (additional copy is enclosed)					

MAILING ADDRESS:

TO:

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

ECOVIE ENVIRO	NMENTAL, LLC	
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company	were filed on December 21, 2015	and assigned
Florida document number L15000211377		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
ECOVIE WATER MANAGEMENT, LLC		
The new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "LLC" of	r the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRESS)		18 81.7 18
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Enter new mailing address, if applicable:		<u> </u>
Mailing address MAY BE A POST OFFICE BOX)	<u> </u>	<u> </u>
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		(2)
3. If amending the registered agent and/or registered of registered agent and/or the new registered office address her		enter the name of the n
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Flori	
	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>	Type of Action
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		Miami Beach, FL 33140	
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Effective date, if other than the	ock does not meet	the applicable	ate of tiling or mo statutory filing	op (op re than 90 days aft requirements, th	tional) er tiling.) Pursuar nis date will not	nt to 605.0 be listed	0207 d as
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