## L16000023133

(Requestor's Name)					
(Address)					
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(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
(December (Million)					
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## **COVER LETTER**

TO:	Registration Section Division of Corporations		
SUBJ	BECT: AAA AMERICAN WATER L	LC	
	Nan	ne of Limited	Liability Company
Dear	Sir or Madam:		
The e	nclosed Registered Agent/Registered Off	ice Change an	d fee(s) are submitted for filing.
Please	e return all correspondence concerning th	is matter to the	e following:
ROX	(ANA MACIAS		
	Name of Person		<del></del>
AAA	AMERICAN WATER LLC		
	Firm/Company		<del></del>
101	W. CYPRESS STREET SUITE K		
	Address		<del></del>
KISS	SIMMEE, FLORIDA 34741		
	City/State and Zip Code		
AAA	AMERICANWATERLLC@GMAIL.	СОМ	
	E-mail address: (to be used for future and	ual report not	ification)
For fu	orther information concerning this matter	please call:	
ROX	ANA MACIAS	407 at (	780-8226
	Name of Person		Area Code & Daytime Telephone Number
	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	R D P	IAILING ADDRESS: egistration Section vivision of Corporations O. Box 6327 allahassee, Florida 32314
	Enclosed is a check for the following	amount:	
	■ \$25 Filing Fee		\$55 Filing Fee & Certified Copy

INHS18 (2/14)

## STÅTEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

. ()	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)  8022 OFFICE COURT SUITE 100		Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)  8022 OFFICE COURT SUITE 100			
	ORLANDO, FLORIDA 32809		DRLANDO, FLORIDA 32809			
	02/02/2016	Ľ	16000023133			
	Date of filing/registration in Florida	4.	Document number			
(a)	ROXANA MACIAS					
. ()	Registered Agent and Registered Office shown on the records of the Florida Dept. of State:					
	8022 OFFICE COURT SUITE 100 ORLAN	809				
	Registered Office Address (MUST BE FLORIDA STREE					
	8022 OFFICE COURT SUITE 100	8				
	ORLANDO , I	<sub>FL</sub> 32809	2016 OCT -7 PK 1: 46			
(b)						
(0)	Enter name of NEW Registered Agent and/or NEW Register	288: 25 E				
	NEW Registered Office Address:					
	101 W. CYPRESS STREET SUITE K	· · · · · · · · · · · · · · · · · · ·				

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.

DOXANA

MACIAS

Printed or typed name of signee

Signature of Registered Agent

Signature of a member or authorized representative of a member