Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet**

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Division of Corporations

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From:

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Account Number : T20010000062 : (323)962-8600 Fhone : (323)962-3889 Fax Number

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN SALT LIFE REDECKING, LLC

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TO:

5/27/2016 10:37.56 AM PDT

13239628300 From: Amanda Sando

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Registration Section

COAST SEAWALL & DOCK

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COVER LETTER

Div	ision of Corp	orations			
SUBJECT:	SALT LIF	E REDECKING, LLC			
SUBJECT.		Name of Limi	ted Liability Company		
The englass.	4 A-+inlan a-5 /	Amendment and fee(s) are subr	nisted for filing		
THE effetose	I ARTICIES OF S	emelimines of succession and succession	mined for thing.		
Please return	all correspon	ndence concerning this matter t	o the following:		
		Cheyenne Mosoley			
			Name of Person		
		Legalzoom.com, Inc.			
Firm/Company					
101 N. Brand Blvd., 11th Floor					
			Address		
		Glendale, CA 91203			
			City/State and Zlp Code		
		MDuncan@CoastSeawal	l.com to be used for future annual report in		
		•	·	Ottileanions	
For further i	nformation co	oncerning this matter, please ca			
Imelda Va	squez		at ()	3 ext. 9724	
Name of Person		Area Code Dayt	ime Tolophono Number		
Enclosed is	a check for th	e following amount:			
\$25.001	Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
	Registr	ING ADDRESS: ation Section n of Corporations	STREET/COU Registration Sec Division of Cor		

P.O. Box 6327 Tallahassee, FL 32314 Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

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SALT THE DEDECKING LLC

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited L	ny as it now appears on our records.) Liability Company)		
The Articles of Organization for this Limited Liability Company Florida document number L16000047774	were filed on 03/08/2016	and assigned	
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	ility company here:		
H2O REDECKING, LLC			
The new name must be distinguishable and end with the words "Limited Liab	oility Company," the designation "LLC"	or the abbreviation "L.L.C."	
Enter new principal offices address, if applicable:	6382 Rosewood Drive		
(Principal office address MUST BE A STREET ADDRESS)	Englewood, Florida 34224		
Enter new mailing address, if applicable:	6382 Rasewood Drive		
(Mailing address MAY BE A POST OFFICE BOX)	Englewood, Florida 34224		
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here. Name of New Registered Agent: New Registered Office Address:		enter the name of the	
		.d.	
	, Flori	Zip Code	

New Registered Agent's Signature, if changing Registered Agenti

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

Page 1 of 3



MGR = Manager

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If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

AMBR = Authorized Member Title Name Address Type of Action _D Add _D Remove □ Remove _

Remove DbA 🗖 _□ Remove □ Remove □ Add Remove

01/22/201	3 02:23PM	5613186965	COAST SEAHALL & DO	ak	PAGE	11/11
D. If amend	ng any other	information, ente	r change(s) here: (Attach additional sheets,	, if necessary.)		
Arti	cle IV. Please	update address	for AMBR Kenneth M. McInnis to:			
6382	Rosewood I	Orive, Englewood	d, Florida 34224			
		~				
	····					
E. Effective	late, if other t	han the date of fil	ling:	(optional)		
		cine, camot be prior a I by the Florida Depart		O days aner		
Dated/	nay	26+4	<u> </u>			
•		H All				
	(Signature o	f a member or suthorized representative of a member			
			Kenneth M. McInnis			
			Typed or printed name of signer			

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Filing Fee: \$25.00

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A ID: 28

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