## L16000052367

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



700302877607

08/25/17--01022--011 \*\*25.00



D SCOTT AUG 2 9 2017

## **COVER LETTER**

TO: Registration Section : Division of Corporations	
SUBJECT: POUND WATER ROWING PRODUCTS, 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:	
PERRY SperBER  Name of Person	
Firm/Company	
809 WELLS DRIVE	
SOUTH DANTOWA, FL 32119 City/State and Zip Code	-
E-mail address: (10 be used for future annual report notification)	• • •
For further information concerning this matter, please call:	
PERRY SperBer at (386) 405-7075  Name of Person Area Code Daytime Telephone Number	
Enclosed is a check for the following amount:	
\$25.00 Filing Fee Certificate of Status    Solution   S	

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

POUND WATER ROWING PRODUCTS	1.0
POUND WATER ROWING PRODUCTS (Name of the Limited Liability Company as it now appears on our reco	ords.)
The Articles of Organization for this Limited Liability Company were filed on 3-14	-16 and assigned
Florida document number <u>L 1600005 2367</u> .	•
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability company here:	
RED - e - Row PRODUCTS LLC  The new name must be distinguishable and contain the words "Limited Liability Company," the designation "L	
The new name must be distinguishable and contain the words "Limited Liability Company," the designation "L	LC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered office address on our recor registered agent and/or the new registered office address here:	ds, enter the name of the new
the new registered office address here.	
Name of New Registered Agent:	
New Registered Office Address:  Enter Florida street addr	ress
	Sie de la Company
City	Florida 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 = M $AMBR = A$	lanager uthorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
<del></del>			
		<del>-</del>	□ Remove
			Change
			□ Add
			□ Remove
			Change
			Remove
			Change
			□ Add
			Remove
			Change
<del></del>			
			Remove
			Change
<del></del>			
			Remove

	; ;
,	
•	
-	
-	
-	
_	
-	
-	
-	
-	
(If an eff	ive date, if other than the date of filing:
the rec ) The	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: 90th day after the record is filed.
Dotad	<u>8-22-17</u>
Dated .	Part Plants
Dated .	Signature of a member or authorized representative of a member

Page 3 of 3

Filing Fee: \$25.00