116000086413

(Re	equestor's Name)	
(Ad	ldress)	
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(Cit	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only

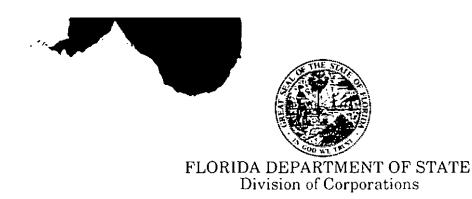


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, Y SULKER NOV 04 20d



October 18, 2019

CLEARAQUA LLC 16112 SW 138TH TERR MIAMI, FL 33196

SUBJECT: CLEARAQUA LLC Ref. Number: L16000086413

We have received your document for CLEARAQUA LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a CORPORATION, but your entity is a LLC. Please complete and return the enclosed blank form(s).

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 419A00021585

Yasemin Y Sulker Regulatory Specialist III

201819 - PN 12:

COVER LETTER

TO: Registration Section Division of Corporations
SHARET CIEDAGUA IIC
SUBJECT: Clearagua IIC Name of Limited Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for filting.
Please return all correspondence concerning this matter to the following:
Adonis Marenco
Firm/Company
16112 SW 138th Ter
Miami, FL 33196 City/State and Zip Code
clear aqualle agmail com 1:-mail address: (to be used to plane annual report notification)
For further information concerning this matter, please call:
Adonis Haren at (786) 9717143 Name of Person Area Code Daytime Felephone Number
Enclosed is a check for the following amount:
S25.00 Filing Fee S30.00 Filing Fee & S55.00 Filing Fee & Certificate of Status Certificate of Status Certified Copy (additional copy is enclosed) Sent check for 35.00 Sent check for 35.00
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

Clearaqua 11c		
(Name of the Emrifed Embitaly Compa (A Florida Limited I	ny as it now appears on our records,) hability Company)	
The Articles of Organization for this Limited Liability Company	were tiled on	and assigned
Florida document number		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabil	thy Company," the designation "LLC" or the	subbrestation "! L.C."
Enter new principal offices address, if applicable:	16112 SW 138 to	
(Principal office address MUST BE A STREET ADDRESS)	Miami, FL 33196	
(Mailing address MAY BE A POST OFFICE BOX)		2019 3019
		er the name of the nev
Name of New Registered Agent:		ت = ن
New Registered Office Address:		<u> </u>
-	Enter Florula street address	
	, Florida	Zin Code
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 registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florada	8 0)	ray s som

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

Title	<u>Name</u>	Address	Type of Action
MGR	Oscar Marenco	12650 sw 6st	
		Davie, FL 33325	™ Remove
			☐ Change
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			☐ Change
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e rec The	ord specifies a delayed effective date, but not an effective time, at $12:01$ a.m. on the earlier 90th day after the record is filed.	of
ated	October 28 . 2019.	
	October 28 . 2019 . Togulare of a member or authorized representative of a member	
	Figurature of a member or authorized representative of a member	
	i l	

Page 3 of 3

Filing Fee: \$25.00