

L16000179688

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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MAIL

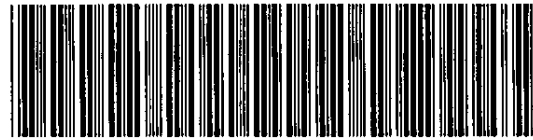
(Business Entity Name)

(Document Number)

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2017 AUG 15 P 3:41
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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D. BRUCE
AUG 16 2017

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: SCCK Watters, LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fees are submitted for filing.

Please return all correspondence concerning this matter to the following:

Roman Fisher

Name of Person

Vendito LLC

Firm Company

3100 N. Ocean Blvd. Apt. 806

Address

Fort Lauderdale, Florida 33308

City, State and Zip Code

roman@venditoinvestments.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Roman Fisher

Name of Person

at (954)

Area Code

414-1534

Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee

☐ \$30.00 Filing Fee &
Certificate of Status

☐ \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

☐ \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

SOCK Watters, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 9/16/16 and assigned
Florida document number L16000179688

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal office address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

5342 Grand Banks Blvd

Greenacres, Florida 33463

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

5342 Grand Banks Blvd

Greenacres, Florida 33463

**B. If amending the registered agent and/or registered office address on our records, enter the name of the
registered agent and/or the new registered office address here:**

Name of New Registered Agent:

Seth Scott

New Registered Office Address:

5342 Grand Banks Blvd.

(Enter Florida street address)

Greenacres

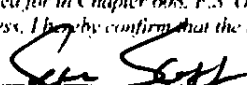
Florida 33463

(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 608, 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)

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TALLAHASSEE, FLORIDA

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

MGR = Manager

MGRM = Managing Member

Title	Name	Address	Type of Action
MGRM	Vendito LLC	3100 N. Ocean Blvd. Suite 806 Fort Lauderdale, Florida 33308	☒ Add ☐ Remove
MGRM	Seth Scott	5342 Grand Banks Blvd. Greenacres, Florida 33463	☒ Add ☐ Remove
MGR	Kyle Watters	12861 Upper Cove Dr. Wellington, Florida 33414	☐ Add ☒ Remove
MGR	Charles Watters	12861 Upper Cove Dr. Wellington, Florida 33414	☐ Add ☒ Remove
MGR	Sherry Watters	12861 Upper Cove Dr. Wellington, Florida 33414	☐ Add ☒ Remove
MGR	Chase Watters	12861 Upper Cove Dr. Wellington, Florida 33414	☐ Add ☒ Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Dated _____

Signature of a member or authorized representative of a member

Kyle Watters
Typed or printed name of signer

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CLERK OF STATE
TALLAHASSEE, FLORIDA

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