116000181642

(Re	questor's Name)	
(Ad	dress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
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COVER LETTER

TO: R	egistration Sectivision of Corp	tion orations		
CUBIECT		CARBERRY LLC		
SUBJECT	;	Name of Limi	ited Liability Company	
The enclos	ed Articles of A	mendment and fee(s) are sub-	mitted for filing.	
Please retu	rn all correspon	dence concerning this matter	to the following:	
		EDDIE SCARBERRY		
			Name of Person	
		AQUANAUTICS POOLS	, LLC	
			Firm/Company	
		41 NEVADA LOOP ROA	D	
		- ,	Address	
		DAVENPORT, FL 33897		
			City/State and Zip Code	
		EDDIE@AQUANAUTICS	POOLS.COM to be used for future annual report notifi	cation)
For further	information co	ncerning this matter, please ca	•	cation)
EDDIE SO	CARBERRY		352 702-5936	
	Name of	Person	Area Code Daytime	Telephone Number
Enclosed is	a check for the	e 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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

EDDIE J. SCARBERRY LLC						
(Name of the Limit	ed Liability Company (A Florida Limited Lia	as it now appears on or oility Company)	ir records.)			
The Articles of Organization for this Limited L Florida document number L16000181642	iability Company w	ere filed on	16	and	l assigr	ned
This amendment is submitted to amend the foll	owing:					
A. If amending name, enter the new name o	f the limited liabili	y company here:				
AQUANAUTICS POOLS LLC						
The new name must be distinguishable and contain the v	vords "Limited Liability	Company," the designat	ion "LLC" or the	abbreviation	"L.L.C	× 27
Enter new principal offices address, if applic	able:					
(Principal office address MUST BE A STREE	T ADDRESS)					
				,	1	
				-	7	
Enter new mailing address, if applicable:				<u> </u>	JAN	
(Mailing address MAY BE A POST OFFICE	BOX)			SSE	1	j. 1
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	•			51.0	<u> </u>	gramm
B. If amending the registered agent and registered agent and/or the new registered or	or registered office	ce address on our	records, ente	r the na	me of	the new
registered agent and/or the new registered o	mee address nere.					
Name of New Registered Agent:	EDDIE J. SCAR	BERRY				
New Registered Office Address:	41 NEVADA LO					
		Enter Florida str	eet address			

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.

City

DAVENPORT

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 = Ma $AMBR = Au$	nnager uthorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add
			Remove
			Change
			Add
			Remove
			Change
			□ Add
			Remove
			Add The Borrows
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an effective date lote: If the dat	, if other than the e is listed, the date mu te inserted in this b ective date on the D	ist be specific and lock does not r	d cannot be prio neet the appli	cable statutory			iling.) Purs		
	ecifies a delaye ay after the rec			ot an effecti	ve time, a	: 12:01 a.	m. on tl	he ear	lier of
			, 2016						

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Filing Fee: \$25.00