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FALLAHASSEE, FLORIDA

AUG 2 0 2019 S. YOUNG

COVER LETTER

	le Water Restoration, LLC	
SUBJECT:	Name of Limited Liability Company	
The enclosed Articles of	of Amendment and fee(s) are submitted for filing.	
Please return all corres	spondence concerning this matter to the following:	
	John W. Oliveira	
	Name of Person	
Division of Corporations Affordable Water Restoration, 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: John W. Oliveira Name of Person Affordable Water Restoration, LLC Firm/Company 11759 Timbermarsh Court Address Fort Myers, FL 33913 City/State and Zip Code tropicalJohn 18@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: John Oliveira Name of Person Area Code Daytime Telephone Number Enclosed is a check for the following amount: S25.00 Filing Fee S30.00 Filing Fee Scertificate of Status Certified Copy (additional copy is enclosed)		
	Firm/Company	
	11759 Timbermarsh Court	
	Address	
	Fort Myers, FL 33913	
	·	
	E-mail address: (to be used for future annual report notification)	
For further information	n concerning this matter, please call:	
John Oliveira		
Name		
Enclosed is a check for	r the following amount:	
■ \$25.00 Filing Fee	Certificate of Status Certified Copy Certificate of Status	

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

Affordable Water Restoration, LLC	
(Name of the Limited Liability Company as it now as (A Florida Limited Liability Compa	opears on our records.) my)
The Articles of Organization for this Limited Liability Company were filed on Florida document number $\frac{1.1600212327}{1.1600212327}$.	n November 18, 2016 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability compar	<u>vy here</u> :
The new name must be distinguishable and contain the words "Limited Liability Company,"	the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	A:: 6
	All ASSEE
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	OR I
B. If amending the registered agent and/or registered office addres registered agent and/or the new registered office address here:	s on our records, enter the name of the
Name of New Registered Agent:	
New Registered Office Address: Ente	r Florida street address
	, Florida
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 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, <u>enter the title, name, and address of each person</u> <u>being ad or removed from our records</u>:

MGR = Manager

AMBR =	Authorized	Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
AMBR	John W. Oliveira	11759 Timbermarsh Court Fort Myers, FL 33913	
			Remove
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(If an effi	ve date, if other than the date of filing:	i,0207 (. ed as th
the rec) The	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlie 90th day after the record is filed.	er of:
Dated	8/8/19	
	11102. 8 200	
	Signature of a member or authorized representative of a member	

Page 3 of 3

Filing Fee: \$25.00