116000216804

(Req	uestor's Name)			
(Add	ress)			
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(City	/State/Zip/Phone	∍ #)		
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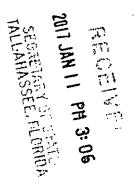


FLORIDA DEPARTMENT OF STATE Division of Corporations

December 12, 2016

JEFFREY HENDERSON 5078 ALAMANDA DR MELBOURNE, FL 32940

SUBJECT: WATER BASED, LLC Ref. Number: L16000216804



We have received your document for WATER BASED, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(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) 245-6051.

Octavia I Simmons Regulatory Specialist II

Letter Number: 216A00026372

COVER LETTER

то:	Registration Section Division of Corporations		•
SUBJ	Water Based LLC		
	Nam	ne of Limited Lia	ability Company
Dear S	Sir or Madam:		
The er	nclosed Registered Agent/Registered Off	ice Change and	fee(s) are submitted for filing.
Please	return all correspondence concerning the	is matter to the f	Collowing:
Jeffre	ey Glen Henderson		
	Name of Person		_
Wate	r Based, LLC		
	Firm/Company	-	_
5078	Alamanda Drive		
	Address		_
Melbe	ourne FL 32940		
	City/State and Zip Code		_
jghm	usc93@gmail.com		
Ē	E-mail address: (to be used for future ann	ual report notifi	cation)
For fu	rther information concerning this matter,	please call:	
Jeffre	ey Glen Henderson	321 at (223-6788
	Name of Person		Area Code & Daytime Telephone Numb
	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	Reg Div P.O	gistration Section ision of Corporations b. Box 6327 lahassee, Florida 32314
	Enclosed is a check for the following	amount:	
	■ \$25 Filing Fee	□ \$5	5 Filing Fee & Certified Copy
INHSI	8 (2/14)		

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Water BASS	ed LLC	
(Name of the Limited Lia (A Flo	ability Company as it now appears on our records.) orida Limited Liability Company)	1
The Articles of Organization for this Limited Liability		20/1 and assigned
	,	
This amendment is submitted to amend the following	g:	
A. If amending name, enter the new name of the	limited liability company here:	
The new name must be distinguishable and contain the words	'Limited Liability Company," the designation "LLC" of	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET AL	ODRESS)	
		distribution of the state of th
Enter new mailing address, if applicable:		2 2 1
(Mailing uddress MAY BE A POST OFFICE BOX		- Chestern
		2
B. If amending the registered agent and/or re	egistered office address on our records	enter the name of the new
registered agent and/or the new registered office a		Control of the manner of the men
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
<u> </u>	, Flor	
	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, enter the title, name, and address of each person being added 6: removed from our records:

MGR = Manager AMBR = Authorized Member **Type of Action** <u>Title</u> Name 1 Jethrey 6. Henderson 5078 Alamanda Dr. BAdd
Me 1 bourne, Fr Remo _□ Change □ Add □ Remove ☐ Change □ Add _□ Remove ____C Si _□ Change _□ Add PH 2: □ Remove ☐ Change ☐ Add _□ Remove _□ Change _□ Add ☐ Remove

☐ Change

	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)	-
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(If an ef Note:	tive date, if other than the date of filing:	5.0207 (3) ed as the
	cord specifies a delayed effective date, but not an effective time, at $12:01$ a.m. on the earlies 90 th day after the record is filed.	er of:
Dated	1/12/17 M	
	Signature of a member or authorized representative of a member	

Page 3 of 3

Filing Fee: \$25.00