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**S Warren** APR 14 2017

## **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: AG Florida'S Best Pool Services 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:
Gregory Dobson Name of Person  AG Florida's Best Pool Services LLC  Firm/Company  4024 Monroe ST.  Address  Holly wood Fl. 33021  Odds 505 @ gmail. Com
E-mail address: (to be used for future annual report notification)  For further information concerning this matter, please call:
Gregory Dobson at (954) 394-7470 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\frac{1}{2}\$\$30.00 Filing Fee \$\frac{1}{2}\$\$ \$55.00 Filing Fee \$\frac{1}{2}\$\$ Certificate of Status \$\frac{1}{2}\$\$ 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** 

$\wedge$	Or
AG Floridas B	est Pool Services LLC  ity Company as it now appears on our records.) a Limited Liability Company)
( <u>Name of the Limited Liabil</u> (A Florid	ity Company as it now appears on our records.) a Limited Liability Company)
· · · · · · · · · · · · · · · · · · ·	Company were filed on3-30- 2017_ and assigned
Florida document number 82-7014836	·
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the lim	nited liability company here:
The new name must be distinguishable and contain the words "Lin	nited 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 ADD)	RESS)
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST_OFFICE BOX)	
D 16 10 - 4b 1-4 1 4 1/	
B. It amending the registered agent and/or registered agent and/or the new registered office add	stered office address on our records, <u>enter the name of the new</u> lress here:
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
Name Designation of Agent's Cianature of the agency Designature	٠

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 dutics, 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

Page 1 of 3

STATE ORIDA 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 <u>Title</u> <u>Name</u> **Address** Type of Action ☐ Remove ☐ Change □ Add ☐ Remove ☐ Change □ Add □ Remove ☐ Change □ Add ☐ Remove ☐ Change □ Add ☐ Remove Rentove ্র শ্রু Change

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fective date, if other than the date of filing:  In effective date is listed, the date must be specific and cannot be prior to date of filing ote:  If the date inserted in this block does not meet the applicable statutor ocument's effective date on the Department of State's records.	optional) ng or more than 90 days after filing.) I ry filing requirements, this date w	Pursuant to 605.02 vill not be listed
record specifies a delayed effective date, but not an effect The 90th day after the record is filed.	tive time, at 12:01 a.m. o	n the earlier
		$\bigcap$
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ated $4-8-17$ $2017$		
ated 4-8-17, 2017	LW LL	

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Filing Fee: \$25.00