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(Re	questor's Name)	
(Ad	dress)	
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PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	e)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
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COVER LETTER

TO:	Registration Se Division of Cor			
SUBJE	=	nkler Solutions LLC		
	-	Name of Lim	ited Liability Company	
The end	closed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please r	return all correspo	ndence concerning this matter	to the following:	
		Joel K French		
			Name of Person	• • • • •
		Irritek Sprinkler Solutions		
		· ·	Firm/Company	
		1507 89th street NW		
			Address	
		Bradenton Fla, 34209		
		Irritekman@gmail.com	City/State and Zip Code	
		E-mail address; (to be used for future annual report notif	ication)
For furt	her information c	oncerning this matter, please ca	all:	
Joel K	French		941 720 3285	
Name of Person		at () Area Code Daytime	Telephone Number	
		ne 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

Irritek Sprinkler Solutions LLC				
(Name of the Limi	ted Liability Company as it (A Florida Limited Liability	now appears on our records.) (Company)		
The Articles of Organization for this Limited L Florida document number		filed on	and assigned	
This amendment is submitted to amend the fol	lowing:			
A. If amending name, enter the new name of	of the limited liability co	ompany here:		
The new name must be distinguishable and contain the	words "Limited Liability Con	npany," the designation "LLC" or th	e abbreviaten "L.L.C."	_
Enter new principal offices address, if appli-	cable:		DISI	
(Principal office address MUST BE A STREET ADDRESS)			- <u> </u>	_
				-
Enter new mailing address, if applicable:			PH 12: 04	C
(Mailing address MAY BE A POST OFFICE	<u>BOX)</u>		0K3	_
B. If amending the registered agent and registered agent and/or the new registered o		ddress on our records, ent	er the name of the	new_
Name of New Registered Agent:	Ronda E French			_
New Registered Office Address:	1507 89th Street NW			
		Enter Florida street address		_
	Bradenton	, Florida	34209	_
	-Ci	in:	Zin 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.

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 = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
AR	Ronda E French	1507 89 th Street NW	Add
		Bradenton, FL 34209	■ Remove
			Change
AR	Joel K French	1507 89th street NW	
		Bradenton, FL 34209	□ Remove
			Change
			Add
		****	☐ Change
			FILED OF CONGRETATIONS OF CONGRETATIONS
			Remove
			☐ Change
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	d, the date must be specific	c and cannot be pri	or to date of filing o	r more than 90 days a	fter filing.) Pursuant to 60	5.020
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Filing Fee: \$25.00