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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : NICI LAW FIRM, P.L.

Account Number : I20110000008 : (239)449-6150

Fax Number : (877)646-0560

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email	Address:					
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## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN **GULF WATER HOLDINGS, LLC**

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08:22 AM PST

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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

Gulf Water Holdings, LLC		
(Name of the Limited Lia (A Fig.	ibility Company as it now appears on our records.) orida Limited Liability Company)	
The Articles of Organization for this Limited Liabilit	y Company were filed on August 17, 2017	and assigned
Florida document number L17000176108	·	
This amendment is submitted to amend the following	<b>y</b> .	
A. If amending name, enter the new name of the l	limited liability company here:	
The new name must be distinguishable and contain the words "l	Limited Liability Company," the designation "LLC" or t	he abbreviation "L.L.C."
Enter new principal offices address, if applicable:	<u></u>	(C. <b>D.</b>
(Principal office address MUST BE A STREET AD	DRESS)	7020 SEC
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Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		<u> </u>
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To The control of the second o	) or 11	171
B. If amending the registered agent and/or registe agent and/or the new registered office address here		name of the new registered
	-	
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	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.

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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
MGR	Paul J. Elmer	6137 Pasadena Point Blvd. S.	□ Add
		Gulfport, FL 33707	■Remove
		·	□ Change
MGR	Elizabeth A. Prokopik	800 Sugarbush Ridge	🛱 Add
		Zionsville, IN 46077	□Remove
			SECHELIAL L
			SS DEmove TO
			□ Add
			Remove
			□ Change
			DAdd
			Remove
			□ Change
			□ Add
			□Remove

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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed. 2020 Dated February Signature of a member or authorized representative of a member

Typed or printed name of signee

Elizabeth ANNE AZOKOPK