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COVER LETTER

TO: Registration So Division of Cor			
SUBJECT:	JAMES M	ARRIW LLC	
30b/LC1.		ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	JAME	ES MATERIA Name of Presson	
		Name of Person WES MUTELIN LLC Firm/Company	
		Firm/Company	
	206	S.E.10 #51. #205 Address	
	DANIA	City/State and Zip Code S-WATERW I @ COMCASI-WET	
	TAUCE E-mail address: (S-MACTINI COMCASI-WET to be used for future annual report notification)	
For further information c	oncerning this matter, please ca	all:	
JAMES	Motrein	at (954) 802-2900 Area Code Daytime Telephone Number	
Name o	f Person	Area Code Daytime Telephone Number	
Enclosed is a check for the	ne following amount:		
☑ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & ☐ \$60.00 Filing Fee, Certified Copy (additional copy is enclosed) ☐ Certified Copy (additional copy is enclosed)	
Mailing Addres		Street Address:	
Registration Section		Registration Section Division of Corporations	
Division of Corporations P.O. Box 6327		The Centre of Tallahassee	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF 4 14 10 00 FT 14 00

Λì

VALLES WATER LLC
(Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)
The Articles of Organization for this Limited Liability Company were filed on TERMAN 13, 2018 and assigned Florida document number
This amendment is submitted to amend the following:
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" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:
(Principal office address MUST BE A STREET ADDRESS)
Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)
B. If amending the registered agent and/or registered office address on our records, enter the name of the new registere agent and/or the new registered office address here:
agent and of the new registered office address here.
Name of New Registered Agent:
New Registered Office Address:
Enter Florida street address

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.

City

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 or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
A <u>MBR</u>	JAMES WATERIN		□Add
		and see with see #205	□ Remove
		206 S.E. 10 TH ST. #205 DANIA BEACH, Fl. 3300	¥_ ⊠ Change
			□Add
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			□Remove
			Change

	ling any other information, enter change(s) here: (Attach additional sheets, if necessary.)
-	
fan effect Note: If	date, if other than the date of filing: (optional) ive date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the date on the Department of State's records.
e record s d is filed	pecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
Tatad S	June 23 2020.
Jaicu	
	June Martin
	Signature of member or authorized representative of a member Aue S March
	TAURES MARRIED
	Typed by printed name of signee