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SECRETARY SERVICES

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: BLACK ROCK WATER LLC Name of Limited Liability Company	
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
MATTHEW J. DIFDZIC, JR. Name of Person	2021, IRR 26 SECNT
Firm/Company	ئىدە مىل ئ
96047 Bottlebrush L'ANCE Address	
City/State and Zip Code O NOT ZERO Jay & BRWH20. Com E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Mante of Person at (757) 784-0447 Name of Person Area Code & Daytime Telephone	Number
Mailing Address:Street Address:Registration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of TallahasseeTallahassee, FL 323142415 N. Monroe Street, Suite & Tallahassee, FL 32303	310
Enclosed is a check for the following amount:	
□ \$25 Filing Fee	
INHS18 (2/14) \$55 Filing Fee & Certified Copy ALREA & SAIO	

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

(a)		(b)_				
P	rincipal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			~	limited liability EPOST OFFICE	
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_JU.	Date of filing/registration in Florida		1800	009	2627	
	Date of filing/registration in Florida	4.	Doc	ument nun	nber	
Register	ed Office Address (MUST BE FLORIDA STREET					
16 For	30/ TNNOVATION LA + Myers	v . <u>339</u> /			2021 AFR 2 SECNETI	* 13 * 2
16 For	301 TNNOVATION LA	v .339, .c, to	2		2021 AFR 26 THE O	• •
16 For	30 TNNUVATION LA PLANTING LA STANDAND	. 339) . C , To 1 Office addre	<u>ss</u> :		2021 APR 26 THE 06 SECRETARIAN	
16 For	30 TNNOVATION LA ET MYERS FI ATTHEW J. DICOZI me of NEW Registered Agent and/or NEW Registered	. 339) . C , To 1 Office addre	<u>ss</u> :		2021 AFR 26 THE 06 SECRETALL TO THE	

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Signature of a member or authorized representative of a member

Printed or typed name of signee

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.

Signature of Registered Agent