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(F	Requestor's Name)	
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COVER LETTER

TO: Registration So Division of Cor				
Oxium, LL	C			
SUBJECT:	Name of Lin	nited Liability Company	····	
The enclosed Articles of	Amendment and fee(s) are sul-	omitted for filing.		
	ondence concerning this matter			
	William B Evans			
		Name of Person		
	Oxnum, LLC			
		Firm/Company		
	7320 Narcoossee Rd			
		Address		
	Orlando, Florida 32822			
		City/State and Zip Code		
	bevans@american-pools.co	om (to be used for future annual report no	1.47 mail my	
For further information of	concerning this matter, please c	·	uncarony	
William B Evans		407 908-3991		
Name c	of Person	at () Area Code Dayti	me Telephone Number	
Enclosed is a check for t	he following amount:			
Cl S25.00 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 Addres		Street Address:	uction	
Registration Section Division of Corporations		Registration Section Division of Corporations		
P.O. Box 632	27	The Centre of	Tallahassee	
Tallahassee, FL 32314		2415 N. Monr	oe Street, Suite 810	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



OXIUM LLC

3027 113 PM 2:31

(Name of the Limit	ted Liability Compa (A Florida Limited)	inv as it now appears on o Liability Company)	our records.)	
The Articles of Organization for this Limited L Florida document number $\frac{118000099417}{1}$	iability Company	were filed on April 19	2.2018 and assigned	
This amendment is submitted to amend the foll	owing:			
A. If amending name, enter the new name o	f the limited liab	ility company here:		
The new name must be distinguishable and contain the v	vords "Limited Liabi	lity Company," the designa	ation "LLC" or the abbreviation "L.L.C."	
Enter new principal offices address, if applic	able;	7320 Narcoossee Rd		
	Principal office address MUST BE A STREET ADDRESS)		22	
				
Enter new mailing address, if applicable:		7320 Narcoossee Rd		
Mailing address MAY BE A POST OFFICE BOX)		Orlando, Florida 328	22	
B. If amending the registered agent and/or ragent and/or tagent and/or the new registered office addre		address on our recor	ds, enter the name of the new regist	
Name of New Registered Agent:	Richard S Tolb	ert		
New Registered Office Address:	12161 Ken Adr	mas Way Suite 220		
		Enter Florida st		
	Wellington		, Florida 33414 Zip Code	
		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.

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>	Name	Address	Type of Action
MGR	William B Evans	7320 Narcoossee Rd, Orlando, FL 32822	
			□Remove
			□ Change
AMBR	William C Reed	7320 Narcoossee Rd.,Orlando, FL 32822	
			□Remove
			□ Add
			□Remove
			□ Change
			□Add
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Filing Fee: \$25.00