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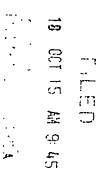
(Red	questor's Name)	
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Special Instructions to	Filing Officer:	





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COVER LETTER

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TO: Registration Sec Division of Corp		•	
SUBJECT:	The Water	Guys LLC	
WODILCT.	Name of Lim		
The enclosed Articles of a	Amendment and fee(s) are sub-	mitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	\mathcal{C}	Laren Henry	
		Name of Person	·
	The	Water Come	LLC
		Firm/Company /	<u> </u>
	<u> 94/6 1</u>	international Ct 1	<u>U</u>
		City/State and Zip Code	
	Shawi	n @ wtrquys. com	l (acite
			44(H)
_			
Shav	un Henry	at (727, 282	0996
Name of	f Person /	Area Code Daytime T	elephone Number
Enclosed is a check for th	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

The laketer (Jus LLO	
(Name of the Limited Liability Comp (A Florida Limited	any as it now appears on ou Liability Company)	r records.)
The Articles of Organization for this Limited Liability Company Florida document number <u>LISDWZIS502</u> .	y were filed on	1/10/2018 and assigned
This amendment is submitted to amend the following:	nending name, enter the new name of the limited liability company here: ame must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation. "L.C." ew principal offices address, if applicable: al office address MUST BE A STREET ADDRESS)	
A. If amending name, enter the new name of the limited lia	bility company here:	
		····
The new name must be distinguishable and contain the words "Limited Liah	ollity Company," the designati	on "LLC" or the abbreviation=1L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		515
		. =
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		3-° CI
B. If amending the registered agent and/or registered or registered agent and/or the new registered office address he		records, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida stre	et address
		Florida
	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 **Type of Action** Title Name Address St- Retersbers, 7/ 337/6 Remove Mak Kristian DAn ☐ Change _ Add □ Remove ☐ Change _□ Remove _ Change □ Add □ Remove _ Change _□ Add _□ Remove

_□ Change

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Note: If	e date, if other that ive date is listed, the of the date inserted in t's effective date or	this block does	s not meet	t the applical	ble statutory fi	ling requiremen	its, this date	e.) Pursuant to will not be	o 605.020 e listed a:
	rd specifies a de Oth day after th			e, but not	an effective	e time, at 12	::01 a.m.	on the e	arlier o
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The 9	October	10	· _	(018	_ ·				
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Page 3 of 3

Filing Fee: \$25.00