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PICK-UP WAR	T MAIL
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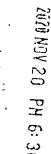


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S. YOUNG



COVER LETTER

Registration Section Division of Corporations

Tallahassee, FL 32314

TO:

SUBJECT:		RE H2O, LLC	
		ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	CESAR A DELGAD	0	
		Name of Person	
		Firm/Company	
	13574 VILLAGE PA	RK DR; SUITE 210	
		Address	
	ORLANDO, FL 3283	7	
		City/State and Zip Code	
	cesardel316@yahoo.co		
		to be used for future annual report not	incation)
For further information c	oncerning this matter, please co	all:	
CESAR A I	DELGADO		696 - 5350
Name o	f Person	at () Area Code Daytin	ne 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 & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address		Street Address:	oution
Registration S Division of C		Registration Se Division of Co	
P.O. Box 632		The Centre of	-

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ECOPLIRE H2O L1 C

(Name of the Limited Liability Compa (A Florida Limited I	inv as it now appears on our records.) Liability Company)		
ne Articles of Organization for this Limited Liability Company orida document number <u>L18000230457</u>	were filed on		
is amendment is submitted to amend the following:			
If amending name, enter the new name of the limited liab	oility company here:		
FLOOR SHIELD TE	CHNOLOGY, LLC		
e new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "L.L.C." or the abbreviation "L.L.C."		
nter new principal offices address, if applicable:	13574 VILLAGE PARK DR		
rincipal office address MUST BE A STREET ADDRESS)	SUITE 210		
	ORLANDO. FL 32837		
nter new mailing address, if applicable: Stationard Address MAY BE A POST OFFICE BOX)	13574 VILLAGE PARK DR SUITE 210		
mining www.exi. 3311 105 111 105 111 105 130 10	ORLANDO. FL 32837		
If amending the registered agent and/or registered office agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address:	address on our records, enter the name of the new register the name of the new register. Enter Florida street address		
	, Florida		

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>	<u>Name</u>	Address	Type of Action
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		-,	□Change
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record spec I is filed.	ifies a delayed effective date, b	out not an effective	time, at 12:01 a.n	n. on the earlier of: (b)	The 90th day after the
ated	NOVEMBER 16	2020	·		
_	Signatur	re of a member or aut	thorized representati	ve of a member	
	Dig.iatai		•		

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(Red	questor's Name)	
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STATEMENT OF AUTHORITY

Pursuant to section 605.0302(1), Florida Statutes, this limited liability company submits the following statement of authority:

NAME OF LLC: 1696 VICTORY AVENUE, LLC
FLORIDA LLC DOCUMENT NUMBER: <u>L20000243860</u>
PRINCIPAL OFFICE ADDRESS: 1169 Victory Avenue, Williamstown, New Jersey 08094
MAILING ADDRESS (if different): 11664 Stonecreek Circle, Fort Myers, Florida 33913
MANAGER: John C. Phillips
Below is the authority given to John C. Phillips, Manager of the above-named LLC. If this person has unlimited authorization, the option "All Authorization to act on behalf of the LLC, including but not limited to the Options Listed Below (Unlimited Authority)" will be selected and will apply to Him/Her.
All Authorization to act on behalf of the LLC, including but not limited to the Options
Listed Below (Unlimited Authority).
☐ He/She has Authority to Execute an Instrument Conveying (Sale/Lease) Real Property
Owned by the LLC.
☐ He/She has Authority to Purchase Property in the Name of the LLC.
☐ He/She has authority to Enter into Contract(s) for the Maintenance/ Improvement of Real
Property.
☐ He/She has authority to Open Bank Account(s) in Name of the LLC.
☐ He/She has authority to Close Bank Account(s) Owned by the LLC.
☐ He/She has authority to Use, Execute, Negotiate, and/or Assign LLC Debit/Credit Cards
and/or other instruments of payment on behalf of the LLC.
He/She has authority to Enter into Contract(s) for the Sale of the LLC's Personal Property (Ex. Vehicles/Equipment)
Property (Ex: Vehicles/Equipment).
He/She has authority to Enter into Contract(s) for the Purchase of Personal Property (Ex: 1)
Vehicles/Equipment).
He/She has authority to Enter into Contract(s) for the Purchase of Supplies:
\square He/She has authority to Enter into Contract(s) for the Purchase of Material(s). $\stackrel{\omega}{6}$
He/She has authority to Enter into Contract(s) for the Purchase of Merchandise.

	He/She has authority to Enter into Contract(s) for the Purchase of Services.
	He/She has authority to Enter into Contract(s) for the Sale of the LLC's Supplies.
	He/She has authority to Enter into Contract(s) for the Sale of the LLC's Material(s).
	He/She has authority to Enter into Contract(s) for the Sale of the LLC's Merchandise.
	He/She has authority to Enter into Contract(s) for the Sale of the LLC's Services.
	He/She has authority to Enter into and maintain Contract(s) for Insurance Services on
behalt	f of the LLC.
	He/She has authority to File Annual Reports with State of Florida.
	He/She has authority to Amend Annual Reports with State of Florida.
	He/She has authority to File Statement of Authority(s) with State of Florida.
	He/She has authority to Amend/Cancel/Renew Statement of Authority(s) in State of
Florid	a.
	He/She has authority to Amend Articles of Organization.
lf mor	re space was needed, a separate sheet(s) of paper will be attached to the back of this form.
1696	VICTORY AVENUE, LLC;
By	Name: NANCY J. PH: LL. PD
	MCyC