

L190000 75095

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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MAIL

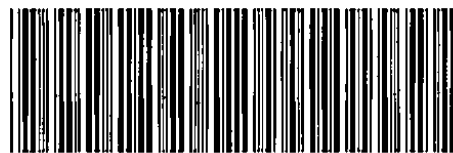
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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09/19/19--0101--023

Y SULKER

OCT 02 2019

10/1/2019 10:10:10 AM

# COVER LETTER

TO: **Registration Section**  
**Division of Corporations**

SUBJECT: PoolSide Products LLC  
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Taylor Wilkerson  
Name of Person  
PoolSide Products  
Firm/Company  
3682 N Wickham Rd B1 #265  
Address  
Melbourne, FL 32935  
City/State and Zip Code  
poolsideproducts@gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Taylor Wilkerson at ( 321 ) 499-0491  
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the 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

TO  
ARTICLES OF ORGANIZATION  
OF

Poolside Products 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 3-18-19

Florida document number L19000075095

This amendment is submitted to amend the following: Addition of an Officer, change

**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 abbrevi

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) \_\_\_\_\_

3682 N Wickham Rd

Melbourne, FL 3293

**B. If amending the registered agent and/or registered office address on our records, enter the registered agent and/or the new registered office address here:**

Name of New Registered Agent: \_\_\_\_\_

New Registered Office Address: \_\_\_\_\_

Enter Florida street address

\_\_\_\_\_, Florida \_\_\_\_\_  
City Zi

**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 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 filing 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

or removed from our records:

**MGR = Manager**

**AMBR = Authorized Member**

**Title**

**Name**

**Address**

AMBR

Wayne Wilkerson

3682 N Wickham STE B1 #<sup>2</sup>

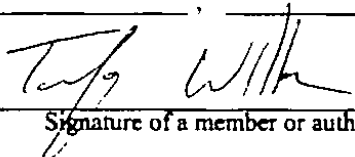
Melbourne, FL 32935

Lined area for text entry.

**E. Effective date, if other than the date of filing:** \_\_\_\_\_ **(optional)**  
(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursua  
**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will no  
document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the  
(b) The 90th day after the record is filed.

Dated 9-17-19

  
\_\_\_\_\_  
Signature of a member or authorized representative of a member

Taylor Wilkerson  
\_\_\_\_\_  
Typed or printed name of signee