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(Re	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
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COVER LETTER

TO:	Registration Se Division of Cor	ection porations		
	Placid Sou	ind Partners, LLC		
SUBJ	ECT:			
		Name of Lin	nited Liability Company	
The er	nclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please	return all correspo	endence concerning this matter	to the following:	
		Terrence Griffiths		
			Name of Person	· · · · · · · · · · · · · · · · · · ·
		Riveles Wahab, LLP		
			Firm/Company	
		638 Park Avenue, #2		
			Address	
		Hoboken, NJ 07030	Address NJ 07030 City/State and Zip Code thernwaterscapital.com E-mail address: (to be used for future annual report notification)	
		Dean@southernwaterscapi		
		E-mail address: (to be used for future annual repor	t notification)
For fu	rther information c	oncerning this matter, please c	all:	
Terre	nce Griffiths		212 785-00	96
			at () Area Code D:	
	Name o	l'Person	Area Code Da	sytime Telephone Number
Enclos	sed is a check for th	ne following amount:		
■ \$2	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)
	NE-20- A 11		0	
	Mailing Addres Registration S		<u>Street Addres</u> Registration	
	Division of C			Corporations
	P.O. Box 632			of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee. FL 32303

Tallahassec, FL 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Placid Sound Partners, LLC			
(<u>Name of the Limited Liability</u> (A Florida L	Company as it now appears o imited Liability Company)	n our records.)	
the Articles of Organization for this Limited Liability Cor	mpany were filed on	th 30, 2020	and assigned
lorida document numberL20000091984			
his amendment is submitted to amend the following:			
. If amending name, enter the new name of the limite	d liability company here	:	
SWC Management, LLC			
he new name must be distinguishable and contain the words "Limited	d Liability Company," the desig	gnation "LLC" or the a	bbreviation L.L.C."
nter new principal offices address, if applicable:		<u></u>	, i, ir ∑an
Principal office address MUST BE A STREET ADDRE	<u>ss</u>		
			933
nter new mailing address, if applicable:			
Mailing address MAY BE A POST OFFICE BOX)			간 일
. If amending the registered agent and/or registered o	office address on our reco	ords, <u>enter the nar</u>	ne of the new regis
gent and/or the new registered office address here:			
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida	street 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

<u>Title</u>	<u>Name</u>	Address	Type of Action
			
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			🖸 Change
			□Change
			□Remove
			□ Remove □ Change
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n effective date is listed, the date mu	ist be specific an	d cannot be prior	to date of filing o	r more than 90 day	(optional) is after filing.) Pursi	uant to 605.02
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ecord specifies a delayed effecti	ve date, but no	t an effective ti	me, at 12:01 a.i	n. on the earlier	of: (b) The 90tl	h day after th
is filed.						
April 8		2020				
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Filing Fee: \$25.00