LZ0000214044

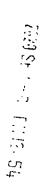
(Requestor's Name)
(Address)
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(Document Number)
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09/06/20--01015--01S #025.08



COVER LETTER

TO: Registration Section

Tallahassee, FL 32314

Division of Cor	porations		
SURJECT: Fi	se I Water com	1VVVIG A 550 CLA VICO ited Liability Company	11.6.
	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fec(s) are sub	mitted for filing	
		-	
Please return all correspo	indence concerning this matter	to the following:	
		V	
		Keyin Mesia Name of Person	
		Name of Person	
	FIRE R	Water Cicaring Assoc	ICHON LLC.
	8901 SW	157th AUC UNIT	16-181
		Address	
	Miau	i FL 33196	
		City/State and Zip Code	
		water creating @ gmail to be used for future annual report not	
	E-mail address: (to be used for future annual report not	fication)
For further information c	oncerning this matter, please ca	all:	
Kevin M	esia	ar(305) 783-	7510
Name o	f Person	at (305) 283- Area Code Daytim	e 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)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addres		Street Address:	ation
Registration S Division of C		Registration Se Division of Cor	
P.O. Box 632	•	The Centre of T	•

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION **OF**

fire L water cleaning A	55Candi	Miller Philas	·,
(Name of the Limited Liability Compani (A Florida Limited Liability Compani (A Florida Limited Liability	y as it now appear ability Company)	rs on our records.)	प
The Articles of Organization for this Limited Liability Company v	vere filed on	7/21/2020	and assigned
Florida document number <u>L20000214044</u>		·	
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liabil	ity company he	ere:	
The new name must be distinguishable and contain the words "Limited Liabilit	y Company," the d	esignation "LLC" or the abl	previation "L.L.C."
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)			
			
B. If amending the registered agent and/or registered office adagent and/or the new registered office address here:	ldress on our r	ecords, <u>enter the nam</u>	e of the new registered
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Flor	rida street address	
	City	, Florida	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
MGR	Kevin mesia	181-31 July 187-31	
			□Remove
			□Change
•			□ Add
			□Remove
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			□Add
			□Remove
			□Change

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