LZ1000212410

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T. MATTHEWS

FEB - 1 2022

COVER LETTER

TO: Registration Section Division of Corporati	ons		
suвјест: <u>ЕДОСИ</u>	OTEC AQUE Name of Lin	onited Lability Company	<u> </u>
The enclosed Articles of Amend		<u>-</u>	
r rease return an correspondence	concerning this matter	to the following.	
	JOHN	Mand of Person	
	Edgewater	Pirm/Company	<u>/</u>
	1917 Jeedle	Palm Drive Address	
_	9 dope water	FIME 37141 City/State and Zip Code	
	E-mail address: (to be used for future annual report notifi	cation)
For further information concerni	ng this matter, please ca	all:	
JOHN MAIR Name of Person		at (<u>380)</u> <u>847-</u> Area Code Daytime	7-3-4-7 Telephone Number
Enclosed is a check for the follo	wing 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		Street Address:	tion.
Division of Cornera		Registration Sect	

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

YOU WITE HOLD	ility Company as it now appears on o	ng records).
(A Flori	ility Company as it now appears on o ida Limited Liability Company)	**************************************
The Articles of Organization for this Limited Liability	Company were filed on	p-707 and assigned
Florida document number <u>UZ1000Z1Z410</u>		•
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lin	mited liability company here:	
The new name must be distinguishable and contain the words "Li	imited Liability Company," the designa	tion "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADL	ORESS)	
		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or register agent and/or the new registered office address here:	ed office address on our record :	s, enter the name of the new registered
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida str	vet address
	700	, 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 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
AMBR	rely rimin	7504 CIPSIWOOD ALK JON SHYNOO BOOCH PL 32168	∑ Add
			□Remove
			☐ Change
			□Add
			□Remove
			□Change
		-	□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□ Add
			□Remove
			Change

	KELLY KITWILL IS NOW 30% OWNER
_	
	and authorized Hember
_	
_	
_	
_	
-	
_	
_	
an effec Sote: If	tive date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as it's effective date on the Department of State's records.
record :	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the i.
ated	19/2822
	Signature of a member or authorized representative of a member
	Signature of a mystoci of a member
	JOHN MOIFY Typed or printed name of signee