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(Requestor's Name)	
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PICK-UP WAIT MAI	L
(Business Entity Name)	
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Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	
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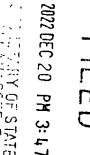
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COVER LETTER

Registration Section Division of Corporations

`TO:

Imperial Fig	re and Water LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Reagan Selinger		
		Name of Person	
	Imperial Fire and Water L	I.C	
		Firm/Company	
	1801 Princess Ct.		
		Address	
	Naples, FL, 34110		
	-	City/State and Zip Code	
	reagans236@gmail.com		
	E-mail address: (to be used for future annual report noti	fication)
For further information c	concerning this matter, please c	all:	
Reagan Sclinger		905 6308730 at ()	
Name o	f Person	at ()	e Telephone Number
Enclosed is a check for the	he following amount:		
□ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	■ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addres Registration S		<u>Street Address:</u> Registration Sec	ction
Division of C	lorporations	Division of Cor	porations
P.O. Box 632		The Centre of T	
Tallahassee, FL 32314 2415 N, Monroe Street, Suite 810			e Street, State 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Imperial Fire and Water LLC		
(Name of the Limited Liability Comp (A Florida Limited	any as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number 1.22000092905	were filed on March 4th, 2022	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lial	oility company here:	
Serenity Concrete Creations LLC		
The new name must be distinguishable and contain the words "Limited Liab	ility Company," the designation "LLC" or	the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		SECRET TALL
Enter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE BOX)		C20 PH 3
3. If amending the registered agent and/or registered office	address on our records, enter the	72 -
gent and/or the new registered office address here:		
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Floric	
	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, <u>enter the title, name, and address of each person-being added or removed from our records:</u>

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
			ZAdd
			□ Remove
			□ Change
			□Add
			□Remove
			Change
			□ Remove
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			⊒Add
			□Remove
			T.Chanas

Reagan Selinger	ignature of a memoer of aut	man en representative	. va a mendet		
e:	gnature of a member or aut		of a number		
December 16th ed		·			
cord specifies a delayed effective of sfiled.		time, at 12:01 a.m.	on the earlier of: ()	b) The 90th day afi	ter the
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Filing Fee: \$25.00