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## **COVER LETTER**

TO:	Registration Se Division of Cor					
		Jev Edmo	nd Real	ty LLC		
SUBJE	ECT:					
		N	ame of Lin	nited Liability Company		
The en-	closed Articles of	Amendment and fee	(s) are sub	unitted for filing.		
Please	return all correspo	ndence concerning	this matter	to the following:		
				Jevenson Edmond		
		_	<u>-</u>	Name of Person	· ·	
				Jev Edmond Realt	ty LLC	
			_	Firm/Company		<del></del>
				814 SW PINE ISLAND SUITE 207	) RD	
				Address		
				Cape Coral, FL 33	991	
				City/State and Zip Code	<u></u>	
				Edmondjevenson@gma	ail.com	
		E-mai	il address: (	to be used for future annual	report notifica	ntion)
For furt	ther information co	oncerning this matte	r, please c	all:		
	Jevenson	Edmond		(941)		264-4868
	Name of	Person		at () Area Code	Daytime T	elephone Number
				THE SOUL	1211/11/11/10	orejmone Number
Enclose	ed is a check for th	e following amount:				
□ \$25	5.00 Filing Fee	× S30.00 Filing	Fee & f Status	☐ S55.00 Filing Fee Certified Copy (additional copy is en		☐ S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address Registration S Division of Co P.O. Box 632 Tallahassee, F	ection orporations 7		Division The Ce 2415 N	ration Section of Corpoentre of Tall	rations Jahassee Street, Suite 810

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

Jev Edmond Realty			
(Name of the Limited Liability Comp: (A Florida Limited	any as it now appea Liability Company)	rs on our records.)	
The Articles of Organization for this Limited Liability Company	were filed on	05/12/2022	and assigned
lorida document number			
This amendment is submitted to amend the following:			
If amending name, enter the new name of the limited liab	oility company h	<u>ere</u> :	
Living Waters Investing LLC			
he new name must be distinguishable and contain the words "Limited Liabi	lity Company," the c	designation "LLC" or the	he abbreviation "L.L.C."
Inter new principal offices address, if applicable:  Principal office address MUST BE A STREET ADDRESS)	2100 Co Charlo	ornelius Blvd, P tte, FL 33953	Port
nter new mailing address, if applicable: <u>Aailing address MAY BE A POST OFFICE BOX)</u>			
. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our r	ecords, <u>enter the </u>	name of the new registe
Name of New Registered Agent:		<del></del>	
			유골 금
New Registered Office Address:	Enter Elec	eida steast addrass	
New Registered Office Address:	Enter Floi	rida street address Florida	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1

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

MGR = 3 AMBR =	Manager Authorized Member			
<u>Title</u>	<u>Name</u>	<u>Address</u>	2100 Cornelius	Type of Action
<del></del>	Jevenson Edmond		Blvd Port Charlotte, FL 33953	X X Add
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				□Change
				□Add
				□Remove
		<del> </del>		□Change
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D. If amending an	y other information,	enter change(s) here: (Attach additional sheets, if necessary.)
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	f other than the date	
Note: If the date		ecific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b) bes not meet the applicable statutory filing requirements, this date will not be listed as the nent of State's records.
	ifies a delayed effe after the record is	ective date, but not an effective time, at 12:01 a.m. on the earlier of: s filed.
Dated10/1	12/2022	
	Signa	ture of a member or authorized representative of a member
		Jevenson Edmond
		Typed or printed name of signee

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