1/13/23, 12:09 PM

## Division of Reporting 6

## Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations Fax Number : (850)617-6383

Fram

Account Name: : REGISTERED AGENTS INC. Account Number: 120090000081

Account Number: 120090000081 Phone: : (307)200-2803 Fax Number: : (855)330-1010

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address:\_\_\_\_

2022 JAN 13 AM 11: 27

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN FUTURE AC WATER SYSTEMS LLC

Certificate of Status	0
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Page Count	04
Estimated Charge	\$25.00

JAN 17 2023

A. LUNT

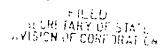
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Electronic Filing Menu

Corporate Filing Menu

Help

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



2022 JAN 13 AM 11: 27

Future AC Water Systems LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

Florida document number L22000302613	re filed on 07/06/22	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liability	company here:	
The new name must be distinguishable and contain the words "Limited Liability C	Company," the designation "LLC" or the	abbreviation "I. IC."
Enter new principal offices address, if applicable:		<u> </u>
(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 add agent and/or the new registered office address here:	ress on our records, <u>enter the na</u>	ume of the new registered
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	Enter Florida street address , Florida	Zip Code
		Zip Code

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
AMBR	Molinar Enterprises, LLC	7901 4th St N STE 300	<b>Z</b> ⊦Add
		St. Petersburg FL 33702	□Remove
			□Change
			□Add
			□Remove
			Change
		<del></del>	□Add
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		enter change(s) here: (Attach additional sheets: if neats strying)  2022 JAN 13 A	M 11. ~~
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Note: If the	he date inserted in this block do	e of filing: (optional) pecific and cannot be prior to date of filing or more than 90 days after filing.) Pursu loes not meet the applicable statutory filing requirements, this date will n	ant to 605.0207 (3)(of be listed as the
document	's effective date on the Departn	ment of State's records.	
e record sp rd is filed.	occifies a delayed effective date	e, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th	day after the
Dated	January 13		
		1 A C non i Ada	
	Signal	ature of a member or authorized representative of a member	<del></del>

Filing Fee: \$25.00