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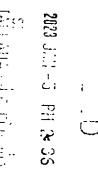
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## **COVER LETTER**

TO: Registration So Division of Cor						
	oast Ice & 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:				
	Scott Acheson					
		Name of Person				
	Emerald Coast Ice & Wate	er, LLC				
		Firm/Company		- <u> </u>	20:	
	224 White Cottage Road			L Nii	<b>2</b> 023 j.:	
		Address		- f.	)i – ::	·
	Santa Rosa Beach, FL 324	59			<u></u> :	
		City/State and Zip Code		- ;	٠,٠	٠.
	scott@stayicy.net			 	သ	
For further information c	E-mail address: ( oncerning this matter, please co	to be used for future annual report noti	fication)			
Scott Acheson	•	321 370-1209				
Name o	f Person		e Telephone Numbe	:1		
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)	Certified	ate of Sta	atus &	
Mailing Addres		Street Address:	vtion.			
Registration S  Division of C		Registration Sec Division of Cor				
P.O. Box 632	7	The Centre of T	allahassee			
Tallahassee, l	FL 32314	2415 N. Monro	e Street, Suite 8	310		

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Emerald Coast Ice & Water, LLC		
(Name of the Limited Liability Company as it now appea (A Florida Limited Liability Company)	rs on our records.)	
The Articles of Organization for this Limited Liability Company were filed on Atlantic document number 1.22000382359	ugust 30, 2022	_ and assigned
<del></del>		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liability company he	ere:	
he new name must be distinguishable and contain the words "Limited Liability Company," the c	designation "LLC" or the abbro	eviation "L.L.C."
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRESS)		2029
	<u> </u>	<u></u>
	<u> </u>	: <i>:</i>
Inter new mailing address, if applicable:	<u>.</u> .	<i>ذ</i> : ،
	••••	
Mailing address MAY BE A POST OFFICE BOX)		<del>78</del>
- <u></u> -		<u>()</u>
3. If amending the registered agent and/or registered office address on our r gent and/or the new registered office address here:	ecords, <u>enter the name o</u>	of the new registe
Name of New Registered Agent:		\ <del>-</del>
New Registered Office Address:		
Enter Flor	rida street address	
	, 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. Infurther 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>	Name	Address	Type of Action
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		Winter Garden, FL 34787	≅Remove
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ffective date, if other than the an effective date is listed, the date mu	ist be specific and cannot be		or more than 90 days			
<u>lote:</u> If the date inserted in this b ocument's effective date on the D			filing requirements	, this date wi	ll not be	listed a
sedilent s cheenve date on the E	repartment of State 5 feet	ords.				
record specifies a delayed effective	ve date, but not an effecti	ve time, at 12:01 a	n moon the earlier o	fi(b) The 9	Oth day :	after th
i is filed.				(0, 1	<b></b> ,	
January 3 ated	2023	·				
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Sut f.	Signature of a member or	<del> </del>				_