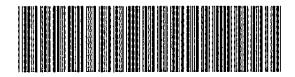
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(Re	questor's Name)	
(Ad-	dress)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	

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COVER LETTER

TO: Registration So Division of Cor			
Cloverwate	ers LLC		
SUBJECT:	Name of Lin	nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing	
	ondence concerning this matter		
	Kerry Roberts		
		Name of Person	
	ACES Inc		
		Firm/Company	7 20 20 20 20 20 20 20 20 20 20 20 20 20
	PO Box 1895		
		Address	3. L.
	Cleveland, GA 30528		
		City/State and Zip Code	
	kroberts@acesworksforyou		<u>့</u> မွ
		to be used for future annual report not	ification),
For further information o	concerning this matter, please c	all:	
Kerry Roberts		813 210-7937 at (
Name o	of Person	at ()	ne Telephone Number
Enclosed is a check for the	he following 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 Addres		Street Address: Registration Sc	ection
Division of C	Corporations	Division of Co	rporations
P.O. Box 632 Tallahassee,		The Centre of 2415 N. Monro	Tallahassee be Street, Suite 810

- Tallahassee: FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Cloverwaters LLC				
(Name of the Limited Liability Company as it no (A Florida Limited Liability Co	w appears on our records.) mpany)			
The Articles of Organization for this Limited Liability Company were filed Florida document number 1.22000520466	d on December 12, 2022	and	d assigne	d
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liability comp	pany here:			
The new name must be distinguishable and contain the words "Limited Liability Compar	y," the designation "LLC" or the a	bbreviatio	n "L.L.C."	
Enter new principal offices address, if applicable:				
Principal office address MUST BE A STREET ADDRESS)		P. to	262	
		<u> </u>	دي ۔	
	 	7		
Enter new mailing address, if applicable:		Ç. Paras Jan I	d:	
Mailing address MAY BE A POST OFFICE BOX)			<u> </u>	
			Ç,	\
	••		<u>.</u>	
B. If amending the registered agent and/or registered office address o agent and/or the new registered office address here:	n our records, <u>enter the nan</u>	ne of the	e new res	zistere
Name of New Registered Agent:				
New Registered Office Address:				
E	Inter Florida street address			
	, Florida			
Cirv		Zip C	ode	

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	Warren J Waldow Jr	13575 58th Street N, STE 339, Clearwater, FL 33760) _ ■ Add
			_ Remove
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			_ 🗆 Remove
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ffective date, if other than the date of filing:	(optional)	
an effective date is listed, the date must be specific and cannot be prior to date of filing or me	ore than 90 days after filing.) Purs	
<u>lote:</u> If the date inserted in this block does not meet the applicable statutory filing ocument's effective date on the Department of State's records.	g requirements, this date will i	not be listed a
ocument's effective date on the Department of State \$ records.		
record specifies a delayed effective date, but not an effective time, at 12:01 a.m. of	on the earlier of: (b) The 90th	h day after the
is filed.		
Danambar 20 2022		
ated December 28 2022		
ated December 28 2022		
ated December 28 2022 Chyalwo Waldur Signature of a member or authorized representative		

Filing Fee: \$25.00