L23000075233

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(Address)	
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(City/State/Zip/Phone	#)
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(Document Number)	
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COVER LETTER

TO:

Registration Section Division of Corporations

Tallahassee, FL 32314

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:	
	ANA MELE		
	Name of Person		
		Firm/Company	
	12472 LAKE UNDERHIL	L RD 433	
	-	Address	
	ORLANDO FL 32828		
	BELLAANA77@HOTMA	•	
	E-mail address: (to be used for future annual report no	nification)
For further information c	oncerning this matter, please co	all:	
ANA MELE			
Name o	f Person	Area Code Dayti	me Telephone Number
Enclosed is a check for t	he following amount:		
■ \$25,00 Filing Fee		Certified Copy	Certificate of Status & Certified Copy
Mailing Addres			ection
Division of C	Corporations	Division of Co	orporations
P.O. Box 632	.7	The Centre of	Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

WATER PLUS FLORIDA LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on $\frac{02}{09}/2023$ Florida document number <u>L23000075233</u> 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 Company," the designation "LLC" or the abbreviation "L.L.C." 12472 LAKE UNDERHILL RD 433 Enter new principal offices address, if applicable: ORLANDO FL 32828 (Principal office address MUST BE A STREET ADDRESS) 12472 LAKE UNDERHILL RD 433 Enter new mailing address, if applicable: ORLANDO FL 32828 (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address _, Florida ___

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.

City

If Changing Registered Agent, Signature of New Registered Agent

Hamending 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>	<u>Address</u>	Type of Action
			\ _Add
			□Remove
			🗀 Add
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Effective date, if other than the of an effective date is listed, the date must Note: If the date inserted in this blook locument's effective date on the Dep	hate of filing: be specific and cannot b ck does not meet the	applicable statutor	ng or more than 90 day		
record specifies a delayed effective d is filed.	date, but not an effec	tive time, at 12:01	a.m. on the earlier	of: (b) The 90th day	after the
Dated JULY 24	. 2023	·			
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Juno Genet	Signature of a member of	.1 ^ •	 	<u>-</u>	<u> </u>