L23000256881

(Re	equestor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phone	: #)
PICK-UP	MAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	cument Number)	
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2023 SEP 19 PH 1: 29

A. PARISHANI SEP 3 0 2023

COVER LETTER

Division of Cor				
Polluted W	aters LLC	•		
SUBJECT:	Name of Lim	ited Liability Company		
				2023
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.		2023 SEP
Please return all correspo	ondence concerning this matter	to the following:		19
				.:- <u>P</u>
	Joseph Wheeley			
		Name of Person		l: 29 :
	Polluted Waters LLC			
		Firm/Company		
	860 Leather Fern Lane			
		Address		
	Mims, Fl 32754			
		City/State and Zip Code		
	jwheeley91@aol.com			
	E-mail address: (to be used for future annual report no	tification)	
For further information c	concerning this matter, please c	all:		
Joseph Wheeley		407 748-3646		
Name o	of Person	at () Area Code Dayti	me 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)	Certified C	of Status &
<u>Mailing Addres</u> Registration		Street Address: Registration S	ection	
Division of C	Corporations	Division of Co	orporations	
P.O. Box 632 Tallahassee,		The Centre of	Tallahassee oe Street, Suite 81	n
rananassee,	1 12 24217	2410 (2.1610)II	oe oncen ounceor	v

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

		19
Polluted Waters LLC		in to the second
(<u>Name of the Limited Liabi</u> (A Flori	lity Company as it now appears on our records.) da Limited Liability Company)	
(
The Articles of Organization for this Limited Liability	Company were filed on 05/25/2023	and assigned
Florida document number L23000256881	<u></u> .	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lin	nited liability company here:	
The new name must be distinguishable and contain the words "Li	mited Liability Company," the designation "LLC" or the	ne abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADD)	ORESS)	
		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or register agent and/or the new registered office address here:		name of the new registered
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Florida	Zip Code
	C W	$cap \in out$

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>	<u>Address</u>	Type of Action
AMB	Austin Whittemore	8250 Cycrs Lane Orlando, FL 32822	
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			OAdd
			28 □ Rigmove
			□Change
			□Remove
			□Change
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Effective date, if other than to fan effective date is listed, the date in Note: If the date inserted in this document's effective date on the	nust be specific and cannot be prior to oblock does not meet the applicable	date of filing or more than 90 days a	otional) der filing.) Pursu his date will no	ant to 605.0207 of be listed as
record specifies a delayed effect d is filed.	tive date, but not an effective time	e, at 12:01 a.m. on the earlier of:	(b) The 90th	day after the
Dated Scpt 8	2023			
P	(electronic of a member or authorize	•		

Filing Fee: \$25.00

Typed or printed name of signee