L23000374017

(Requestor's Name)
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(City/State/Zip/Phone #)
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PiCK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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COVER LETTER

	gistration Sec vision of Corp		•			
end rezwe.	Lightning Ba	y Ice & Water LLC				
SUBJECT:		Name of Lin	nited Liability Company			
The enclose	d Articles of A	mendment and fee(s) are sub	omitted for filing.			
Please retur	n all correspon	dence concerning this matter	to the following:			
		Leean Ramon Orama				
		Name of Person				
		Lightning Bay Ice & Water LLC				
			Firm/Company			
		8577 Canyon Creek Trail				
	Address					
		Parrish, FL, 34219				
	City/State and Zip Code					
		orama@lightningbayice.com	n to be used for future annual report noti			
For further i	information cor	n-mail address: (neerning this matter, please e	•	neation)		
Dr. Zahabiy	rah Orama		516 450-0470 at()			
	Name of I	Person	Area Code Daytim	e Telephone Number		
Enclosed is	a check for the	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)		
	niling Address:		Street Address:	ation		
Registration Section Division of Corporations		Registration Se Division of Cor				
P.0	D. Box 6327		The Centre of T	allahassee		
Ta	Hahassee FI	32314	2415 N. Monto	e Street, Suite 810		

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Lightning Bay Ice & Water LLC		
(Name of the Limited Liability Compan (A Florida Limited Li	y as it now appears on our records.) ability Company)	
The Articles of Organization for this Limited Liability Company v	vere filed on August 9th, 2023	and assigned
lorida document number L23000374017		
his amendment is submitted to amend the following:		
. If amending name, enter the new name of the limited liabil	ity company here:	
he new name must be distinguishable and contain the words "Limited Liabilit	y Company," the designation "LLC" or the	abbreviation "L.L.C."
Inter new principal offices address, if applicable:		20
Principal office address MUST BE A STREET ADDRESS)		2023 NOV
		- 2
		ω
inter new mailing address, if applicable:		
••		ب ب
Mailing address MAY BE A POST OFFICE BOX)		pulse.
 If amending the registered agent and/or registered office ac gent and/or the new registered office address here: 	ldress on our records, <u>enter the na</u>	me of the new regi
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	LARV CHINGG MEVY AGGEVSS	
	, Florida _	Zip Code
	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. 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
MGR	Dr. Zahabiyah Orama	8577 Canyon Creek Trail, Parrish, FL 34219	■Add
			⊟Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
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			Change

(If an el <u>Note:</u>	tive date, if other than the date of filing:
f the reco ecord is f	rd specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the iled.
Dated	November 6th 2023
	Signature of a member or authorized representative of a member
	Lecan Ramon Orama

Typed or printed name of signee