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COVER LETTER

то:	Registration S Division of Co			
e-1 115 115	Hoovey W	ater LLC		
SUBJE	C1:	Name of Lim	ited Liability Company	
The enc	losed Articles of	Amendment and fee(s) are sub	mitted for tiling.	
Please r	eturn all corresp	ondence concerning this matter	to the following:	
		Joshua Hoover		
			Name of Person	
		Hoovey Water LLC		
			Firm/Company	
3242 STONEBRIDGE TRAIL				
Address				
		Valrico, Florida 33596		
City/State and Zip Code				
		hooveywater@gmail.com		
For furt	her information (ts-mail address: (concerning this matter, please ca	to be used for future annual report no all:	tilication)
Joshua		terroring in manera presses to	813 599-5869 at ()	
	Name (of Person	Area Code Dayti	me Telephone Number
Enclose	d is a check for t	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)

Street Address: Registration Section Division of Corporations

The Centre of Tallahassee

Mailing Address: Registration Section Division of Corporations

P.O. Box 6327

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Hoovey Water LLC		
(<u>Name of the Limited Liability</u> (A Florida L	Company as it now appears on our records.) imited Liability Company)	
the Articles of Organization for this Limited Liability Cor	mpany were filed on 11/27/23	and assigned
lorida document number 1.23000527133	·	
his amendment is submitted to amend the following:		
. If amending name, enter the new name of the limite	ed liability company here:	
loovey Fence and Water LLC		
he new name must be distinguishable and contain the words "Limite	ed Liability Company," the designation "LLC" or	the abbreviation "L.L.C."
nter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRE	ESS)	
		<i>[</i> 53
		- : - : - : - : - : - : - : - : - : - :
9		7
nter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		-, ,,
		<u>း</u> မှာ
		<u></u>
3. If amending the registered agent and/or registered of	office address on our records, <u>enter the</u>	name of the new regis
gent and/or the new registered office address here:		
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	. Florid	la
	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. Thereby 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
			□Add
			□Remove
			□ Change
			□Remove
			□Change
			□Remove
			⊡Change
			⊡Add
			□Remove
			□Change
			□Add
			□ Remove

				
				
				<u> </u>
 -				
			_	
ective date, if other than the c	late of filing:		(optiona	l)
reffective date is listed, the date must te: If the date inserted in this blo	be specific and cannot be pri	or to date of filing or mor	re than 90 days after film	g.) Pursuant to 605,020
cument's effective date on the Dep				
cord specifies a delayed effective	date, but not an effective	time, at 12:01 a.m. or	n the earlier of: (b)	The 90th day after the
s filed.				
December 7	2023			
ed December 7				
	· 2023		of a member	