## L23000546099

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## **COVER LETTER**

TO: Registration S Division of Co		, st	
		ge Notes	
SUBJECT:	WATERSONG D	ited Liability Company	<del></del>
	Name of Cin	ned Liability Company	
The enclosed Articles of	f Amendment and fee(s) are sub	mitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	MARIA NUN		
		Name of Person	
	INVICTA LIVI		<del></del>
		Firm/Company	
	3204 EAGLE	- afron State	
		Address	
	KISSIMMEE, 7	· · · · · · · · · · · · · · · · · · ·	<u> </u>
		City/State and Zip Code	
	E-mail address: (	IA O SMALL. COM to be used for future annual report not	fication)
For further information	concerning this matter, please ca	all:	
HULL ALGAM	7	at ( 321 ) 588 - 3	264 ie Telephone Number
Name	of Person	Area Code Daytim	ie Telephone Number
Enclosed is a check for t	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)
Mailing Addre	·88:	Street Address:	
Registration	Section	Registration Se	ction
Division of C		Division of Cor	· ·
P.O. Box 63.		The Centre of T	
Tallahassee	F1 (7) 14	1415 N. Monro	e Street Suite 210

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

WATERSOUG 234 W	<u>C</u>	2024 AUG 30 PM I2: 02
(Name of the Limited Liability (A Florida Li	Company as it now appea imited Liability Company)	ns on our records.
The Articles of Organization for this Limited Liability Con	npany were filed on _	08 128 124 TALLAHASSEE, FLORIDA and assigned
Florida document number <u>(23000546099</u>		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	d liability company h	ere:
The new name must be distinguishable and contain the words "Limited	d Liability Company," the	designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRE.	<u> </u>	
Enter new mailing address, if applicable:		_
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered o agent and/or the new registered office address here:	office address on our	records, <u>enter the name of the new registered</u>
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Fle	orida street address
<u></u>	<u></u>	Florida Zw Code
Now Darietanul Arant's Signatura if shanging Dagistanul A	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	Luis A. Flores	3700 FARM BELL PLACE	<u></u> <b>Æ</b> Add
		lake mary, Fl 3274L	□Remove
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cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) if filed.	The 90th day after the
ed AUGUST 28 2024	
$\sim$	
Signature of a member or authorized representative of a member	

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