L24000333187

Office Use Only



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FILED 2024 SEP 18 FH 3: 16

COVER LETTER

TO: Registration Section Division of Corporations	
Water Wagna	lers LLC
SUBJECT: Water Wrang	of Limited Liability Company
The enclosed Articles of Amendment and fee(s) a	re submitted for filing.
Please return all correspondence concerning this t	natter to the following:
Garrett	Ross-Johnson Name of Person
	Name of Person
Water	Weanglers
	Wranglers Firm/Company
7194	Cuman Drive
<u> </u>	Cumpu Prive Address
Clear	water .FL 33764
	Nater; FL 33764 City/State and Zip Code
	isjohnson 18@gmail.com
E-mail add	dress: (to be used for future annual report notification)
For further information concerning this matter, pl	ease call:
Garrett Ross-Tohoson	01777 \ 637 - 7646
Garrett Ross-Johnson Name of Person	at (727) 637 - 7646 Area Code Daytime Telephone Number
Enclosed is a check for the following amount:	
/	& ☐ \$55.00 Filing Fee & ☐ \$60.00 Filing Fee,
Certificate of Sta	tus Certified Copy Certificate of Status &
	(additional copy is enclosed) Certified Copy (additional copy is enclosed)
Mailing Address: Registration Section	Street Address: Registration Section
Division of Corporations	Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Water Wrangless LLC The Articles of Organization for this Limited Liability Company were filed on $\frac{7/29/2024}{}$ Florida document number <u>L24000333187</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. Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (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 City

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 statute's relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation's 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 Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

ANIDK - A	Authorized Member		
<u>Title</u>	Name	Address	Type of Action
<u>ambr</u>	Garrett Ross-Tohnson	2194. Campus Drive Clearwater, FL 33764-	[]VAdd
			□Remove
			☐ Change
			□Add
			
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			□Remove
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			□Add
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			□ Change
			□Add
			□Remove

_____ □Change

ve date, if other than the date of filing:						
If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed ent's effective date on the Department of State's records. d specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after ed.						
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Signature of a member or authorized representative of a member			·			
Signature of a member or authorized representative of a member		PARTIEN ROL	2 - Johnsone			_
		Signature of a men	mber or authorized repr	esentative of a member		
Garrett Ross-Johnson Typed or printed name of signee		Garatt Ro	iss-Johnson			

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