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TO: Amendment Section
Division of Corporations

P.O. Box 6327 Tallahassee, FL 32314

NAME OF CORPOR	RATION: Artezia Water Con	ipany	***************************************	
DOCUMENT NUMI				
The enclosed Articles	of Amendment and fee are su	bmitted for filing.		
Please return all corre	spondence concerning this ma	tter to the following:		
	Trevor Hand			
		Name of Contact Persor	1	
	Artezia Water Company			
		Firm/ Company		
	1856 Flowing Well Rd.			
•	Address			
	Bonifay, FL 32425			
•		City/ State and Zip Code		
info@	garteziawater.com			
	E-mail address: (to be us	sed for future annual report	notification)	
For further informatio	n concerning this matter, pleas	se call:		
Trevor Hand		at (850	576-5776 de & Daytime Telephone Number	
Name of Contact Person		Area Co	de & Daytime Telephone Number	
Enclosed is a check for	or the following amount made	payable to the Florida Depa	irtment of State:	
■ \$35 Filing Fee	□S43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mailing Address Amendment Section			Address ment Section	
Division of Corporations		Division of Corporations		

Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment

to

Articles (of Incor	poration
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lo

Atti	icies of fiteorporation
artozia	Water Company Inc.
(Name of Corporation a	s currently filed with the Florida Dept. of State)
20100	0027650
40100	Number of Corporation (if known)
(190cument	Number of Corporation (II known)
Pursuant to the provisions of section 607.1006, Florida Statis Articles of Incorporation:	itutes, this Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the corpo	ration:
	The new
	corporation," "company," or "incorporated" or the abbreviation Inc," or "Co". A professional corporation name must contain the reviation "P.A."
D. P	NEA
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRE	<u>SSS</u>)
•	
C. Enter new mailing address, if applicable:	N/A
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)	
D. If amending the registered agent and/or registered of	office address in Florida, enter the name of the
new registered agent and/or the new registered office	
N/A	
Name of New Registered Agent 1874	
•	a-rid
	(Florida street address)
V - 0 - 100 - 100 - 111	
New Registered Office Address:	
	SS 20 00 F
New Registered Agent's Signature, if changing Register	red Agent:
I hereby accept the appointment as registered agent. I an	t familiar with and accept the obligations of the position. 🖰 😅 🥏
	ाकः O
Signatur	e of New Registered Agent, if changing

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add

X Change	<u>PT</u>	John Doc	
X Remove	\underline{V}	Mike Jones	
<u>X</u> Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change	T	Connie Hand	1856 Flowing Well Rd.
X Add			Bonifay, FL 32425
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

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in amendment provides for an exchange, reclassific ovisions for implementing the amendment if not co (if not applicable, indicate N/A)	ation, or cancellation ntained in the amen	on of issued shares, adment itself:	
	······································		

The date of each amendment(s) adoption:	, if other than the
date this document was signed. 04/27/2018	
Effective date if applicable: (no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date document's effective date on the Department of State's records.	will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes east for the amendment(s) by the shareholders was/were sufficient for approval.	
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statemen must be separately provided for each voting group entitled to vote separately on the amendment(s):	I
"The number of votes east for the amendment(s) was/were sufficient for approval	
by	
 The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required. The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required. 	
Dated 4-27-2018 Signature Randall a Hand	
(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
(Typed or printed name of person signing)	
(Title of person signing)	