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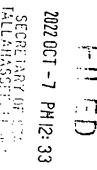
(Rec	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	Certificates	of Status
Special Instructions to Filing Officer:		
J	, HORNE	
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COVER LETTER

NAME OF CORPORATION: THE WATER ST. HILLTE'S T. DOCUMENT NUMBER: Plous 3794

The enclosed Articles of Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

DOTTE JORGENSEN
Name of Contact Person
JAH WATERSTUP UTILITIES INC
Firm/ Company
10 Box 740925
Address
ORANGE CITY FL 32774
City/ State and Zip Code
Sado II.
Scott of MWU, com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Scott Jurgensen at (UCO) 281-7950

Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

S35 Filing Fee

TO: Amendment Section

\$43.75 Filing Fee & Certificate of Status

□\$43.75 Filing Fee & Certified Copy

(Additional copy is enclosed)

\$52.50 Filing Fee Certificate of Status

Certified Copy (Additional Copy

is enclosed)

Mailing Address

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of



(Name of Corporation as currently filed with the	· · · · · · · · · · · · · · · · · · ·
T10000013794	· · ·
(Document Number of Corporation (if	known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Co</i> its Articles of Incorporation:	orporation adopts the following amendment(s) t
A. If amending name, enter the new name of the corporation:	
	T1.
name must be distinguishable and contain the word "corporation," "company," or "in "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional co "chartered," "professional association," or the abbreviation "P.A."	The new accorporated" or the abbreviation "Corp.," orporation name must contain the word
B. Enter new principal office 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)	
If amending the registered agent and/or registered office address in Florida, er new registered agent and/or the new registered office address:	nter the name of the
Name of New Registered Agent	
(Florida street address)	
New Registered Office Address:	, Florida
(City)	(Zip Code)
ew Registered Agent's Signature, if changing Registered Agent:	
nereby accept the appointment as registered agent. I am familiar with and accept the	obligations of the position
-	Ç , , , , , , , , , , , , , , , , , , ,
Signature of New Registered Agent, if	changing

Check if applicable

[☐] The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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 = ChiefExecutive 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. Example: X Change PT John Doc X Remove V Mike Jones <u>X</u> Add <u>SV</u> Sally Smith Type of Action Title <u>Name</u> Address (Check One) 1) ____ Change Add _ Change Remove _ Change __ Add __ Remove 4) ____ Change Add Remove Change

Add

__ Change

 Λdd

Remove

Remove

(Attach additional sheets, if necessary).	icles, enter change(s) here: (Be specific)
-	
 	
If an amendment provides for an excha-	nge, reclassification, or cancellation of issued shares,
provisions for implementing the amend	dment if not contained in the amendment itself:
(if not applicable, indicate N/A)	

The date of each amendment(s) adoption: 9-30-202, if other than the date this document was signed.
Effective date if applicable: 9-30-2022
(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 will not be listed as the document's effective date on the Department of State's records.
Adoption of Amendment(s) (CHECK ONE)
The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast 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 statement must be separately provided for each voting group entitled to vote separately on the amendment(s):
"The number of votes cast for the amendment(s) was/were sufficient for approval
by
(voting group)
Dated 10-5-2022
Signature
(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)
Scott Jorgenson (Typed or printed name of person signing)
(a) paragraph of p
tresident
(Title of person signing)