P11000103244

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Amend



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COVER LETTER

*TQ: Amendment Section Division of Corporations

NAME OF CORPORATION: Mage Wester Management Worth DOCUMENT NUMBER: 711000103844 Amence
DOCUMENT NUMBER: 711000103844 America
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Bona Bora Name of Contact Person Mage Water Management North Americ Firm/Company 13921 Huntwick Diz Address Oflando FL 32837 City/ State and Zip Code Lata C mage-water management. com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call: Boro Botton at 407 403-5750 Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee \$\bigcup \\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) \$\bigcup \\$43.75 Filing Fee & 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 Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation of

Articles of Amendment
Articles of Incorporation of 11.0EC 16 PH 2: 13 (Name of Corporation as currently filed with the Florida Dept. of State)
Articles of Incorporation
MOFC .
MAGE WATER MANAGEMENT NORTH AMERICA TOR. 16 PM 2
(Name of Corporation as currently filed with the Florida Dept. of State)
LAHASSE OF STATE
(Name of Corporation as currently filed with the Florida Dept. of State) (Document Number of Corporation (if known)
(Document Number of Corporation (11 known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following
amendment(s) to its Articles of Incorporation:
A. If amending name, enter the new name of the corporation:
The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the
abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," of "Co". A professional corporation
name must contain the word "chartered," "professional association," or the abbreviation "P.A."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)
(Frincipal office address MOST BE A STREET ADDRESS)
C. Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)
D. If amending the registered agent and/or registered office address in Florida, enter the name of the
new registered agent and/or the new registered office address:
Name of New Registered Agent:
Traine of New Yorkstella rigem.
(Florida street address)
Y D A COM AND THE STATE OF THE
New Registered Office Address: , Florida (City) (Zip Code)
(Cny) . (Exp conc)
New Registered Agent's Signature, if changing Registered Agent:
I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

. ,	If AMENDING the Officers and/or Directors, please list all officers/directors of the corporation as you now want the record to be. Please indicate the title(s), name and address for each officer/director. (Our database can index up to 6 officers/directors. If you have more than 6 officers/directors, please list them on an								
	additional sheet.) Title(s) 1)		6 4	Address 13921 Huntwick DR OF Cando FL 32837					
	2 <u>) VP</u> S	Bona Batra	-	13921 Huntwick DR Chambotl 32837					
	3)		-						
	4)	·	-						
	5)	·	-						
	6)		-						
	If REMOVING	an officer and/or director, please list the ti	itle(s) an	d name of the officer/director to be removed:					
	Title(s)	Name	Title(s)	Name					
	1)`		4)						
	2)		5)	•					

If amending or adding additional Art (attach additional sheets, if necessary).	(Be specific	c)				
						
						
						
						
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If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:
(if not applicable, indicate N/A)
12 6 4
The date of each amendment(s) adoption: 12-9-11
ffective date if applicable:
(no more than 90 days after amendment file date)
Adoption of Amendment(s) (CHECK ONE)
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.
by the stationalds 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)
(vouing group)
☐ 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 Dec 9,2011
Dated
$\cdot a + a$
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)
D II P-Lro
Bona V. Batra
(Typed or printed name of person signing)
President
(Title of person signing)