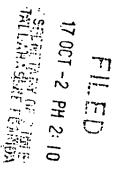


Office Use Only



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COVER LETTER

TO: Amendment Section

Division of Corporations NAME OF CORPORATION: Home Water Florion 120pies P13000015623 DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Ryan Eisenman
Name of Contact Person HomeWatch Florion Tropics
Firm/Company
407 W. Riversioe DR.

Address Supite, F1 33469
City/ State and Zip Code ryaneyez/4 E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Ryan Eisenman at (561) 844,0004
ame of Contact Person Area Code & Daytime Telephone Number Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee □\$43.75 Filling Fee & □\$43.75 Filing Fee & ■\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) Mailing Address Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations P.O. Box 6327 Clition Building

2661 Executive Center Circle Tallahassee, FL 32301

Tallahassee, FL 32314

FILED

Articles of Amendment

PURSUE FETARA OF STREET

17 OCT -2 PH 2: 10

	Articles of Incol	rporation	TALLAHA SERE FEBRION
Home Wa	ITCH FloRIE	A TROP	oies
			Florida Dept. of State)
	P1300001	5623	
(Document Number of C	Corporation (if	known)
Pursuant to the provisions of section 607,1006, its Articles of Incorporation:	Florida Statutes, this F	lorida Profit C	forporation adopts the following amendment(s) to
A. If amending name, enter the new name of	the corporation:		
		cones;	Inc The new
Flyiname must be distinguishable and contain the "Corp.," "Inc.," or Co.," or the designation word "chartered," "professional association,"	"Corp, " "Inc, " or "C	o". A profess	or "incorporated" or the abbreviation ional corporation name must contain the
B. Enter new principal office address, if app (Principal office address MUST BE A STREE			SAME
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFIC			SAME
D. If amending the registered agent and/or r	egistered office addre	ss in Florida, e	enter the name of the
new registered agent and/or the new regis			
Name of New Registered Agent	5	AME	
	(Florida stree	1 address)	
New Registered Office Address:		·	, Florida
THE RESIDENCE OFFICE AGAINSTS.	(C	Tity)	(Zip Code)
New Registered Agent's Signature, if changin	o Danistared Scents		
I hereby accept the appointment as registered a		th and accept t	he obligations of the position.
	الردم	n_	
	Signature of New Res	gistered 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 officerldirector 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 Doc 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	<u>1-T</u>	John D	<u>)00</u>			
X Remove	<u>V</u>	Mike J	<u>ones</u>			
<u>X</u> Add	<u>sv</u>	Sally S	mith			
Type of Action (Check One)	<u>Title</u>		Name	c . 1	<u>Addres</u> s	
1) Change		_		ges le		
Add			Chan	;5		
Remove						
2) Change			$\frac{\mathcal{C}}{\mathcal{C}}$			
Add		VO	as the) (^ - ~		
Remove		4,	\mathcal{M}°	of Mer.		
3) Change			<u> </u>			
Add		1.1	'Ψ,	(G)		
Remove	H	n_{10}	Va,	Corporation,		
4) Change	<u> </u>	_				
Add						
Remove'						
5) Change		_				
Add						
Remove						
6) Change		_				
Add						
Remove						

	ticles, enter change(s) here: (Be specific)
-	· · ·
	go de la companya de
	Jacker .
process of the second	
and the second second	
	
	A THE ST.
rovisions for implementing the and	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	

The date of each amendment(s) adoption:	1.23.17	, if other than the
date this document was signed.	9,25.17	
Effective date if applicable:	7,2377	
	more than 90 days after amendment file date)	
Note: If the date inserted in this block does not me document's effective date on the Department of State	· · · · · · · · · · · · · · · · · · ·	this date will not be listed as the
Adoption of Amendment(s) (CHECK	(ONE)	
☐ The amendment(s) was/were adopted by the share by the shareholders was/were sufficient for appro-		lment(s)
☐ The amendment(s) was/were approved by the shar must be separately provided for each voting group		
"The number of votes cast for the amendmen	nt(s) was/were sufficient for approval	
by	roup)	
(voting g	roup)	
The amendment(s) was/were adopted by the board fection was not required. The amendment(s) was/were adopted by the incorp		
Sction was not required.		
Dated	7	
17aled		
Signature	2400	
(By a director, president	other officer - if directors or officers have no	t been
select ed, by air Inc orpora appointed tiduciary by th	nor – if in the hands of a receiver, trustee, or others tiducions:)	er court
appointed inductary by the	·	. 1
	Ryan Eisenm Ax	<u> </u>
(Type	d or printed name of person signing)	
	TRESIDENT	
	(Title of person signing)	