P170000068456

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	<u> </u>
(Cit	ty/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL .
(Bu	isiness Entity Nam	e)
(Do	ocument Number)	
Certified Copies		of Status
Special Instructions to	Filing Officer:	
}		

Office Use Only



900320126859

10/23/18--01042--009 **35.00



Anund

NOV 0 5 2018 ! ALBRITTON

COVER LETTER

TO: Amendment Section Division of Corporations

QUALIT NAME OF CORPORATION:	Y WATER S.A INC
DOCUMENT NUMBER: P1700006845	6
The enclosed Articles of Amendment and	fee are submitted for filing.
Please return all correspondence concernir	ng this matter to the following:
JENNY ANDRAD	Fi.
	Name of Contact Person
18505 IST AVENU	Firm/ Company UE
ORLANDO, FL32	Address 820 US
	City/ State and Zip Code
JENNYMED17@HOTM	AILCOM
E-mail address	(to be used for future annual report notification)
For further information concerning this ma	atter, please call:
JENNY ANDRADE	407 488-0503 ar ()
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amor	unt made payable to the Florida Department of State:
\$35 Filing Fee \$35 Filing Certificate of	
Mailing Address Amendment Section Division of Corporation 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 to Articles of Incorporation of

QUALITY WATER S.A INC (Name of Corporation as currently filed with the Florida Dept. of State) P17000068456 (Document Number of Corporation (if 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: name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "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) 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 (Florida street address) New Registered Office Address: (Zip Code) 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, 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 <math>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	<u>PT</u> <u>Jo</u>	ohn Doe		
X Remove	<u>V</u> <u>M</u>	tike Jones		
X Add	<u>SV</u> <u>\$</u> :	ally Smith		
Type of Action (Check One)	Title	Name.	<u>Addres</u> s	
1) Change	ין	ANDRADE, JENNY	18505 1ST AVENUE	
			ORLANDO, FL 32820	
Add X Remove				
2) Change	P	MEDINA, YECID	18505 IST AVENUE	
X Add			ORLANDO, FL 32820	-
Remove				_
3) Change				_
Add				
Remove				_
4) Change				
Add				
Remove				
3) Change				_
Add				_
Remove				-
6) Change				_
Add			 	-
Remove				

	ch additional sheets, if necessary)	. (Be specific)	nge(s) here:			
	· · · · · · · · · · · · · · · · · · ·					
·					·····	
			 			
				•		
			·			
		··				
	· · · · ·					
						
		 				
		·				
						
lf an	anændnænt provides for an exc	hange, reclassif	ication, or cancel	ation of issued sh	ares,	
pro	visions for implementing the am	hange, reclassif	ication, or cancell contained in the a	ation of issued sh mendment itself:	ares,	
pro	anwndment provides for an exc visions for implementing the am (if not applicable, indicate N/A)	change, reclassif	ication, or cancel contained in the a	ation of issued sh mendment itself:	are <u>s,</u>	
pro	visions for implementing the am	hange, reclassif	ication, or cancell contained in the a	ation of issued sh mendment itself:	are <u>s,</u>	
pro	visions for implementing the am	hange, reclassif	ication, or cancel contained in the a	ation of issued sh mendment itself:	ares.	
pro	visions for implementing the am	hange, reclassif	ication, or cancel contained in the a	ation of issued sh mendment itself:	are <u>s,</u>	
pro	visions for implementing the am	hange, reclassif	ication, or cancel contained in the a	ation of issued sh mendment itself:	ares.	
pro	visions for implementing the am	change, reclassif	ication, or cancel contained in the a	ation of issued sh mendment itself:	ares,	
prov	visions for implementing the am	hange, reclassif	ication, or cancel contained in the a	ation of issued sh mendment itself:	ares,	
pro	visions for implementing the am	change, reclassif	ication, or cancel contained in the a	ation of issued sh mendment itself:	ares.	
pro	visions for implementing the am	hange, reclassif	ication, or cancel contained in the a	ation of issued sh mendment itself:	ares,	
pro	visions for implementing the am	change, reclassif	ication, or cancel contained in the a	ation of issued sh mendment itself:	ares.	

10/19/2018 _____ if other than the The date of each amendment(s) adoption: _ date this document was signed. 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 will not be listed as the document's effective date on the Department of State's records. (CHECK ONE) Adoption of Amendment(s) ■ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) he the chareholders was/upre 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) ☐ 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. (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) Tenny Andrade
(Typed or printed name of person signing) Tresident
(Title of person signing)