P200000 39525

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORP	ORATION: L.A.G. WATER S	YSTEM CORP	
DOCUMENT NUM	P20000030525		
The enclosed Article	es of Amendment and fee are su	bmitted for filing.	
Please return all cor	respondence concerning this ma	itter to the following:	
	LUIS ARAQUE		
	Name of Contact Person		
		Firm/ Company	
	8317 NARCOOSSEE RD AI	PT 4305	
	ORLANDO, FL 32827	Address	
	-	City/ State and Zip Code	a
	ion concerning this matter, plea	se call:	
LUIS ARAQUE		at (
Nam	e of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check	for the following amount made	payable to the Florida Depa	urlment of State:
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	S43.75 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 Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amend Divisio The Co	Address ment Section n of Corporations entre of Tallahassee J. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

(Name of Corporation as currently filed with the Florida Dept. of State) P20000039525 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendn its Articles of Incorporation: A. If amending name, enter the new name of the corporation: N/A The ne 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) N/A N/A N/A N/A N/A N/A N/A N/
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C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) N/A
(Mailing address MAY BE A POST OFFICE BOX)
N/A : 2723
N/A
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 N/A
N/A N/A
(Florida street address)
New Registered Office Address: N/A , Florida
(City) (Zip Code)

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)

Example:

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 Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	VP	MARIA I, ROSALES	1201 NW 191ST ST APT G412
XX Add			MIAMI GARDENS, FL 33179
Remove			N/A
 2) Change	N/A	N/A	N/A
Add			N/A
Remove			N/A
3) Change	N/A	N/A	N/A
Add			N/A
Remove			N/A
4) Change	N/A	N/A	N/A
Add			N/A
Remove			N/A
5) Change	N/A	N/A	N/A
Add			N/A
Remove			N/A
6) Change	N/A	N/A	N/A
Add		_	N/A
Remove			N/A

E. If	amending or adding additional Articles, enter change(s) here:
(Al	tach additional sheets, if necessary). (Be specific)
N/A	
F. <u>If:</u> <u>pi</u> N/A	an amendment provides for an exchange, reclassification, or cancellation of issued shares, royisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)
N/A	
√/A	
N/A	
N/A	
N/A	
N/A	

	06/18/2020	
The date of each amendment(s)	adoption:	, if other than the
date this document was signed.		
	/18/2020	
Effective date <u>if applicable</u> :	(no more than 90 days after amendn	nent file date)
Note: If the date inserted in this document's effective date on the I	block does not meet the applicable statutory filing Department of State's records.	requirements, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were a action was not required.	dopted by the incorporators, or board of directors wi	thout shareholder action and shareholder
☐ The amendment(s) was/were as by the shareholders was/were	lopted by the shareholders. The number of votes ca sufficient for approval.	st for the amendment(s)
☐ The amendment(s) was/were approvided for must be separately provided for	proved by the shareholders through voting groups. r each voting group entitled to vote separately on the	The following statement are amendment(s):
"The number of votes cas	t for the amendment(s) was/were sufficient for appr	roval
by		11
	(voting group)	·
Dated		
Ciamatur.	1/-//////	JII
select	lirector, president or other officer – if directors or or oby an incorporator – if in the hands of a receiver ated fiduciary by that fiduciary)	fficers have not been , trustee, or other court
	LUIS ARAQUE	
	(Typed or printed name of person signi	ng)
	PRES	
	(Title of person signing)	