Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : VORAUS S&O LLC Account Number : 120220000166 Phone : (321)732-2022 : (407)577-3447 Fax Number

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN RESTORDRY LLC

Certificate of Status Ü Certified Copy 01 Page Count \$25.00 Estimated Charge

Electronic Filing Menu

Corporate Filing Menu

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T. L. J. UX

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| FO: Registration Sec Division of Corp | tion orations | | |
| | | ; | • |
| SUBJECT: | Name of Limit | ed Liability Company | |
| | | | |
| The enclosed Articles of A | Amendment and fee(s) are subn | nitted for filing. | |
| Please return all correspor | idence concerning this matter t | o the following: | |
| | CASTANEDA OROZCO, I | DANET Y | |
| | RESTORDRY LLC Name of Limited Liability Company | | |
| | RESTORDRY LLC | | |
| | | Firm/Company | |
| | 526 OPPITZ EN | | |
| | | Address | |
| | LAKELAND, FL 33803 | | |
| | | City/State and Zip Code | |
| | E-mail address: (t | o be used for future annual report notifi | cation) |
| For further information co | oneeming this matter, please ca | all: | |
| CASTANEDA OROZCO |), DIANET Y | at () | |
| Name o | f Person | Area Code Daytime | Telephone Number |
| Enclosed is a check for the | ne following amount: | | |
| ■ \$25.00 Filing Fee | ☐ \$30.00 Filing Fee & Certificate of Status | Certified Copy | Certificate of Status & |
| | | | |

Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address:

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

From: ELSY OLIVAR

ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION **OF**

| RESTORDRY LLC | | |
|--|--|------------------|
| (Name of the Limited Li (A F) | ability Company as it now appears on our records.) orida Limited Liability Company) | |
| | ity Company were filed on 01/20/2023 | _ and assigned |
| This amendment is submitted to amend the followin | g: | |
| A. If amending name, enter the new name of the | limited liability company here: | |
| Water Hub Restauration LLC | | |
| The new name must be distinguishable and contain the words | "Limited Liability Company," the designation "LLC" or the abbr | evistion "L.L.C. |
| Enter new principal offices address, if applicable | :: | |
| (Principal office address MUST BE A STREET A | DDRESS) | |
| Enter new mailing address, if applicable: | | |
| (Mailing address MAY BE A POST OFFICE BO) | <u>x</u> | |
| B. If amending the registered agent and/or registagent and/or the new registered office address he Name of New Registered Agent: | stered office address on our records, <u>enter the name</u> ere: | 1424 |
| Name of New Registers - | | P : |
| New Registered Office Address: | Enter Florida street address | = = = |
| _ | , Florida | Zip Code |
| | City | ыр сиас |

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or. if this document is being filed to merely reflect a change in the registered office address. I hereby confirm that the limited liability company has been notified in writing of this change.

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

| MGR = | Manager |
|--------|--------------------------|
| AMBR = | Authorized Member |

| <u>Title</u> | Name | Address | Type of Action |
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