

L21000 231 072

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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MAIL

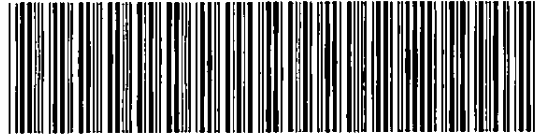
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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2023 APR 27 AM 9:36  
SECRETARY OF STATE  
DIVISION OF CORPORATE AFFAIRS

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: WF Investment 2020 LLC, a Florida Limited Liability Company

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Fernando Galue

Name of Person

Firm/Company

1530 SW 126TH PL

Address

Miami, FL 33184

City/State and Zip Code

fernandogalue@hotmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Fernando Galue

Name of Person

at ( 786 ) 295-3287

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

- |   |  |  |  |
|---|--|--|--|
| <input type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(additional copy is enclosed) |
|---|--|--|--|

**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

2023 APR 27 PM 5:35  
RECEIVED  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FL

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

WF Investment 2020 LLC, a Florida Limited Liability Company

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 05/18/2021 and assigned  
Florida document number L21000231072.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

**Enter new principal offices address, if applicable:**

**(Principal office address MUST BE A STREET ADDRESS)**

**Enter new mailing address, if applicable:**

**(Mailing address MAY BE A POST OFFICE BOX)**

**B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:**

Name of New Registered Agent:

Fernando Galue

New Registered Office Address:

1530 SW 126TH PL

Enter Florida street address

Miami

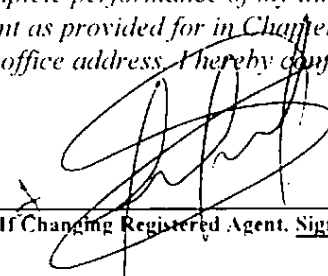
City

Florida 33184

Zip Code

**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 Changing Registered Agent, Signature of New Registered Agent

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>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
AMBR	Fernando Galue		<input type="checkbox"/> Add
		1530 SW 126TH PL, Miami, FL 33184	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Wendy Romero		<input type="checkbox"/> Add
		1530 SW 126TH PL, Miami, FL 33184	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Maru Romero		<input type="checkbox"/> Add
		12345 SW 18 ST #117, Miami, FL 33175	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Fernando Galue	1530 SW 126TH PL, Miami, FL 33184	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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2023 APR 21 11 03 36  
SECRET  
ALL INFORMATION CONTAINED  
HEREIN IS UNCLASSIFIED  
DATE 04-21-2023 BY 60322 UCBAW

2023 APR 27 11 02 36  
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7911

**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.

Dated

04/21/2023

Signature of a member or authorized representative of a member

FERNANDO GALUÉ

Typed or printed name of signee

**Filing Fee: \$25.00**