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(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

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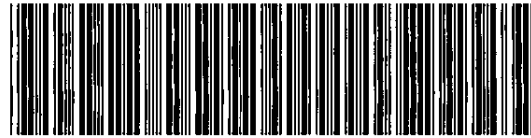
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

D. BRUCE
JUL 06 2017

LAW OFFICE OF STEPHEN D. DUNEGAN, P.A.

Board Certified in Tax Law and Wills, Trusts & Estates

June 30, 2017

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

Re: Amendment to Articles of Organization for LLCs

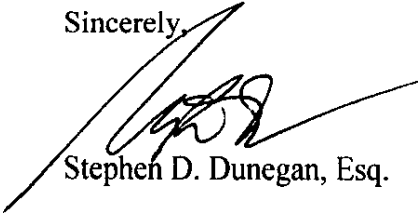
To Whom It May Concern:

Please find enclosed:

1. Cover Letter and Articles of Amendment to Articles of Organization of Wagers Investments, LLC.
2. Cover Letter and Articles of Amendment to Articles of Organization of Wagers Properties, LLC.
3. Two checks in the amount of \$25 each for the filing fees.

If you should have any questions, please contact our office at (407) 654-9400

Sincerely,


Stephen D. Dunegan, Esq.

SDD/ac
Enclosures

cc: Nancy R. Wagers (w/enclosures)

Physical Address
55 North Dillard St.
Winter Garden, FL 34787

Steve@DuneganLaw.com
O: 407-654- WILL (9455)
F: 407-654-1514

Mailing Address
P.O. Box 770400
Winter Garden, FL 34777

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TALLAHASSEE, FLORIDA

COVER LETTER

TO: **Registration Section
Division of Corporations**

SUBJECT: Wagers Investments, LLC.

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:

Stephen D. Dunegan, Esq.

Name of Person

Law Office of Stephen D. Dunegan, PA.

Firm/Company

55 North Dillard Street

Address

Winter Garden, FL 34787

City/State and Zip Code

steve@duneganlaw.com

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

For further information concerning this matter, please call:

Stephen D. Dunegan

Name of Person

407 654-9455

at ()

Area Code

Daytime Telephone Number

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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Enclosed is a check for the following amount:

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

MAILING ADDRESS:

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

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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

Wagers Investments, LLC.

(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 04-29-2002 and assigned
Florida document number L02000010193.

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: Nancy R. Wagers

New Registered Office Address: 2932 Westchester Avenue

Enter Florida street address

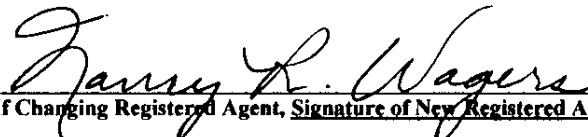
Orlando, Florida 32803

City

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> |
|--------------|--------------------|----------------------------------|--|
| MGR | Lawrence T. Wagers | 2932 Westchester Avenue, Orlando | <input type="checkbox"/> Add |
| | | | <input checked="" type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Change |
| MGR | Nancy R. Wagers | 2932 Westchester Avenue, Orlando | <input checked="" type="checkbox"/> Add |
| | | | <input type="checkbox"/> Remove |
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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.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

Dated

June 27, 2017

_____, 2017.
Nancy L. Wagers
 Signature of a member or authorized representative of a member

Nancy R. Wagers

Typed or printed name of signee