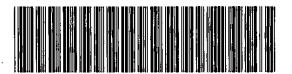
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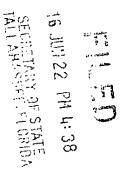
(Re	questor's Name)	
· (Ad	dress)	
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(Cit	y/State/Zip/Phone	÷#)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer.	
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06/22/16--01030--009 \*\*25.00



J. HARRIS

#### **COVER LETTER**

то:	Registration Sec Division of Corp			
CHDI	4710 WIBM	IH, LLC		
SUBJ	ECI:	Name of Limi	ted Liability Company	
The e	nclosed Articles of A	Amendment and fee(s) are subr	mitted for filing.	
Please	e return all correspor	ndence concerning this matter t	to the following:	
٠		Robert S. Kingsland		
			Name of Person	
		4710 WIBMH, LLC		
			Firm/Company	· · · · · · · · · · · · · · · · · · ·
		501 Florida Central Parkwa	ay #522008	
			Address	<del> </del>
		Longwood, FL 32752		
			City/State and Zip Code	
		RSK@KingslandInc.com	1000	, <u></u>
r c	at the control		o be used for future annual report notifi	canon)
ror ru	irther information co	oncerning this matter, please ca	ш:	
Robe	rt S. Kingsland		407 629-0244 at ( )	
	Name of	Person	at () Area Code Daytime	Telephone Number
Enclo	sed is a check for th	e following amount:		
<b>=</b> \$2	25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$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

## **UNDERWOOD & ROBERTS, PLLC**

**ATTORNEYS AT LAW** 

A PROFESSIONAL LIMITED LIABILITY COMPANY INCLUDING A PROFESSIONAL ASSOCIATION

Toll Free Telephone: 866-343-7874 E-mail: runderwood@rlulaw.com www.rlulaw.com

Research Triangle Office 3110 Edwards Mill Road, Suite 100 Raleigh, NC 27612 Tel: (919) 664-8803 Fax: (919) 664-8975

> Florida Office 5728 Major Blvd Suite 550 Orlando, FL 32819 Tel (407) 354-3420 Fax: (407) 354-3840

Southern California/Nevada Office 7251 West Lake Mead Blvd. Suite 530 Las Vegas, NV 89128 Tel: (702) 699-7333 Fax (702) 699-7377

> <u>Kentucky Office</u> 175 E. Main St. Suite 200 Lexington, KY. 40507 Tel: (866) 343-7874

Robert L. Underwood, P.A. \*
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Heather Underwood Ashe Δ
Eric E. Pridgen \*
Rachel E. Harrelt Δ
Emily K. Dillow #
David S. Cohen ¶, Of Counsel
Shannon L. Evans #, Of Counsel

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† Licensed in NC, KY, & GA only
\* Licensed in NC & SC only

\$\Delta\$ Licensed in NC only

# Licensed in FL & GA only

# Licensed in CA & NV only

# Licensed in NC, FL, TN & GA only

June 20, 2016

Florida Department of State
Registration Section/Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

RE: 4710 WIBMH, LLC

Dear Sir/Madam:

I am submitting an Amendment to the Articles of Organization of a Florida Limited Liability Company for 4710 WIBMH, LLC along with a check in the amount of \$25.00 for the filing fee.

If there are any questions regarding this filing, please contact me. Thank you for your assistance.

Andrea Cook acook@rlulaw.com

3110 Edwards Mill Road, Suite 100 Raleigh, NC 27612

Tel: 919-664-8803 or 866-343-7874

Fax: 919-664-8975

### ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

4710 WIB	MH, LLC				
( <u>Name of the Limited Liability Compa</u> (A Florida Limited I	ny as it now appears of Liability Company)	n our records.)		_	
The Articles of Organization for this Limited Liability Company  Torida document number	were filed on	8/21/2003	an	d assig	ned
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the limited liab	ility company here	:			
he new name must be distinguishable and contain the words "Limited Liabi	ity Company," the desi	gnation "LLC" or the a	ıbbreviatio	on "L.L.	C."
Enter new principal offices address, if applicable:	450 Commerce W	ay #108			
Principal office address MUST BE A STREET ADDRESS)	Longwood, FL 32	2750	<u> 50</u>	د	
			EC	<u></u>	-7-6
Enter new mailing address, if applicable:	501 Florida Centra	al Parkway #522008		图 22	12775 - 12775 - 12776
Mailing address MAY BE A POST OFFICE BOX)	Longwood, FL 32	2752	<u> </u>	<u>.</u>	+1000 mg
valuing dualess MATI BETTT OST OTTTICE BONY			25 25 25	<u></u>	E <sub>R.M.</sub>
			Ó.W.	ထ	
3. If amending the registered agent and/or registered of egistered agent and/or the new registered office address her  Name of New Registered Agent:		our records, <u>enter</u>	r the <u>na</u>	ime o	the i
N. B. '4 1005 Address					
New Registered Office Address:	Enter Florida	street address	•		
		, Florida _			
	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>	Type of Action
MGR	BENCHWARMERS GP, INC.	5728 MAJOR BLVD., SUITE 550	
-		ORLANDO, FL 32819	■ Remove
			Change
MGR	ROBERT S. KINGSLAND	501 Florida Central Parkway #522008	■ Add
		Longwood, FL 32752	Remove
			Change
			Add
	,		Remove
			Change
			Add
			🗆 Remove
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			☐ Change

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ote: If cumen	e date, if other than the date of filing:
ed _	Co/15 , 2016
	Kulit SK
	Signature of a member or authorized representative of a member
	Robert S. Kingsland, Manager and Authorized Representative
	Robert S. Kingsland, Manager and Authorized Representative  Typed or printed name of signee
	Timed or printed name of cirmos

Filing Fee: \$25.00