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TALLAHASSEE, FLORIDA

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: WR Insurance Agency 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:

Michael Bender
(Name of Person)

WR Insurance Agency
(Firm/Company)

4 Manhattanville Road Suite 103
(Address)

Purchase, NY 10577
(City/State and Zip Code)

For further information concerning this matter, please call:

Michael Bender at (914) 417 6950
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☐ \$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)

STREET ADDRESS:
Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

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TALLAHASSEE, FLORIDA

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ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

WR Insurance Agency, LLC

(Present Name)
(A Florida Limited Liability Company)

FIRST: The Articles of Organization were filed on 9/15/2004 and assigned
document number LD4000067875.


SECOND: The following amendment(s) to the Articles of Organization was/were adopted by the limited
liability company:

NAME Change:

ALternative Investment Insurance Agency, LLC

Dated 6/21, 2005

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TALLAHASSEE, FLORIDA



Signature of a member or authorized representative of a member

Michael J. Bender

Typed or printed name of signee