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Special Instructions to	Filing Officer:	
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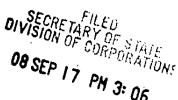
## **COVER LETTER**

TO: Registration So Division of Cor		,			
CUDIECT.	THE HENR	Y COMPANY, L.L.C.	0		
SUBJECT:	(Name of Lim	ited Liability Company)			
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.			
Please return all correspondent	ondence concerning this matter	to the following:			
Wilma J. Henry					
		(Name of Person)			
(Firm/Company)					
	27112 Sea Breeze Way				
		(Address)			
		Vesley Chapel, FL 33544 (City/State and Zip Code)	·		
For further information of	concerning this matter, please c	eall:			
Wilma J. Henry (Name of Person)		at ( 813 ) 991-9493  (Area Code & Daytime Telephone Number)			
(Mame	or reison)	(Area Code & Dayume 1	стернове миниет)		
Enclosed is a check for t	he following amount:				
<b>2</b> \$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)		
Regist Divisie	ING ADDRESS: ration Section on of Corporations ox 6327	STREET/COURIER Registration Section Division of Corporation Clifton Building			

2661 Executive Center Circle Tallahassee, FL 32301

Tallahassee, FL 32314

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



			-0
	ENRY COMPANY, L.L.C.		
( <u>Name of the Limited Liabilit</u> (A Florida	y Company as it now appea Limited Liability Company)	rs on our records.	
(XXX 10X10W			
The Articles of Organization for this Limited Liability (	Company were filed on	01-28-2005	and assigned
Florida document numberUnknown (See Attached C	οργ)		
Florida document number	<u> </u>		
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the lim	<u>ited liability company he</u>	<u>re</u> :	
WJH & Associates,			
The new name must be distinguishable and end with the wo "L.L.C."	ords "Limited Liability Comp	any," the designation "	LLC" or the abbreviation
Enter new principal offices address, if applicable: .	<del>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</del>		
(Principal office address MUST BE A STREET ADD	RESS)		·····
Enter new mailing address, if applicable:	<u>-,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>		
(Mailing address MAY BE A POST OFFICE BOX)			
	<del></del>		······································
B. If amending the registered agent and/or regis	stered office address on	our records, enter	the name of the ne
registered agent and/or the new registered office add		our records, <u>enter</u>	***************************************
Name of New Registered Agent:			
New Registered Office Address:			
	(E	Enter Florida street ac	ldress)
		, 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 608, 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 the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Mai MGRM = M	nager Janaging Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add Remove
			Add Remove
			Add Remove
	Malandra Carana Car		Add Remove
			Add Remove
			Add Remove
D. If amend	ding any other information, enter chang	ge(s) here: (Attach additional sheets, if necessary.)	_
**********			<del></del>
	X + 1 12 00	100	_
Dated	Signature of a member	2 ) / / / / / / / / / / / / / / / / / /	
	Ţ	Wilma J. Henry	

Page 2 of 2

Filing Fee: \$25.00