L05000/06811

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. (Address)					
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(City/State/Zip/Phone #)					
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SEGRETARY OF STATE ON STATE OF CORPORATIONS

J. BRYAN

AUG -4 2008

EXAMINER

COVER LETTER

TO: Registration Sec Division of Corp			
SUBJECT: UB	6 Enterprises, (Name of Limit	LLC DBA I	7-5
The enclosed Articles of A	Amendment and fee(s) are sub	mitted for filing.	OB AU
Please return all correspon	ndence concerning this matter	to the following:	G OF ST
	Robert A	Bachman (Name of Person)	OB AUG -1 PH 1:48
	WBG Ent	erprises, LLC (Firm/Company)	
	27800 0	12 41 Road (Address)	
	Bonita Spr	(City/State and Zip Code)	<u>35</u>
For further information co	oncerning this matter, please ca	all:	
Robert (Name of	Bachman of Person)	at (239) 495 ~ (Area Code & Daytime T	9898 x 277 elephone Number)
Enclosed is a check for th	e following amount:		
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	□\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certificate of Status & Certificate 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

WBG Enterpri	ses, LLC DBA	I+-S	
(Name of the Limited Liability Compan (A Florida Limited L	y as it now appears on our records. iability Company)		
The Articles of Organization for this Limited Liability Company Florida document number <u>L 05000 [0 6 8] </u> .	were filed on 11/2/05	and assigned	
This amendment is submitted to amend the following:		7 000	
A. If amending name, enter the new name of the limited liabi	lity company here:	64 1: 48	
The new name must be distinguishable and end with the words "Limit "L.L.C."	ted Liability Company," the designation	on "LLC" or the abbreviation	
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 off registered agent and/or the new registered office address here		er the name of the new	
Name of New Registered Agent:			
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 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 = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	Jeremy A. Bachman	27800 01241 Road Bonita Springs. Fr 34135	Add Remove
			Add Remove
			Add Remove
······			Add Remove
			Add Remove
······			Add Remove
D. If amendi	ng any other information, enter change(s) here: (Attach additional sheets, if necessary.)	SECHETARY OF STATE BIVISION OF CORPORATION 08 AUG - 1 PM 1: 48
Dated	aly 28, 2008	<u></u>	TIONS
-	Signature of a member of Robert 3ac Typed or	r authorized representative of a member hman r printed name of signee	

Page 2 of 2

Filing Fee: \$25.00