## 1060000021979

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(Address)				
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## **COVER LETTER**

TO:		istration ( ision of Co	Section orporations			
SUBJE	îCT.	W D COI	RDOVA, LLC			
00001			Name of Lin	mited Liability Company	<del></del>	
The end	closed	Articles o	of Amendment and fee(s) are sui	bmitted for filing.		
Please	retum	all corresp	oondence concerning this matter	r to the following:		
			CHRISTOPHER J. GERT	TZ, ESQ.		
				Name of Person		
			CHRISTOPHER J. GERT	TZ, PA		
				Firm/Company	<del></del>	
	Address FORT LAUDERDALE, FL 33316					
			CHRIS@GERTZLAW.NE	City/State and Zip Code	<del> </del>	
			E-mail address: (	to be used for future annual report notif	fication)	
For furti	her in	formation	concerning this matter, please c	all:		
CHRISTOPHER J. GERTZ, ESQ.				954 565-2601		
Name of Person		of Person	Area Code Daytime	: Telephone Number		
Enclose	d is a	check for t	he following amount:			
\$25.	.00 Fil	ing 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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

W D CORDOVA, 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 FEBRURARY 28, 2006 and assigned Florida document number L06000021979 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: New Registered Office Address: Enter Florida street address

## 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.

City

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

Title	<u>Name</u>	<u>Address</u>	Type of Action
MGRM	FLORIDA LAND INVESTOR'S INC.	1845 Cordova Road	□ Add
		Ste. 215 Fort Lauderdale, FL 33316	■ Remove
			Change
MGRM	JOHN T. LOOS	1845 Cordova Road	■ Add
		Ste. 215 Fort Lauderdale, FL 33316	Remove
			Change
			□ Add
		<del>-,</del>	☐ Remove
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te: If the date inserted in this	rust be specific and cannot be prior to date of fi	(optional)  illing or more than 90 days after filing.) Pursuant to 605.02 cory filing requirements, this date will not be listed
record specifies a delay he 90th day after the re	ed effective date, but not an effeecord is filed.	ective time, at 12:01 a.m. on the earlier
January 15	2019	
ed January 15	2019	

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Page 3 of 3

Filing Fee: \$25.00