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Account#: 120000000088

Date:10/1	6/2020					
Name: Je	nnifer Bialowas	_				
Reference #:		_				
	WOA HO	OLDINGS, LLC				
Articles of I	ncorporation/Authorization	to Transact Business				
✓ Amendmen	t					
Change of	Agent	Puase use orgina submission date 10/16/2020				
Reinstatem	ent	submission date				
Conversion		10/16/2020				
Merger						
☐ Dissolution	Withdrawal					
Fictitious N	ame					
Other						
Authorized Amoun	\wedge	RECEIVED 200 OCT 27 PH 12: WINDSTON OF STANDORS WINDSTON TALLANASSEE, FLOR TALLANASSEE, FLOR				
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Account#: I20000000088

Date: 10/16/2020	
Name: Jennifer Bialowas	
Reference #: 1277657	
Entity Name: WOA H	IOLDINGS, LLC
Articles of Incorporation/Authorization	on to Transact Business
✓ Amendment☐ Change of Agent	Please use origina submission date 10/14/2020
Reinstatement	submission date
Conversion	10/16/2020
☐ Merger	
☐ Dissolution/Withdrawal	
Fictitious Name	
Other	
Authorized Amount: 25.00	
Signature:	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	ER OAK ADVISORS, LLC			
(Name of the Limited Liab	llits Company as it now appears on our records.) da Limited Liability Company)			
The Articles of Organization for this Limited Liability Florida document number	Company were filed on March 31, 2006	an	d assign	red
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the lin	nited Hability company here:			
WOA Holdings, LLC		23	202	
The new name must be distinguishable and contain the words "Li	mired Liability Company," the designation "LLC" or	the abbieviatio	- E F.C	
Enter new principal offices address, if applicable:			끜	
(Principal office address MUST BE A STREET ADD	PRESS)		-6	
		39	2	<u> </u>
		5100	7:	0
Enter new mailing address, if applicable:		H-A	2	
(Mailing address MAY BE A POST OFFICE BOX)				
B. If amending the registered agent and/or regi registered agent and/or the new registered office add		iter_the_nai	me of t	the nev
Name of New Registered Agent:				
New Registered Office Address:	Enter Florida street address			
	. Florida			
	City . Florida	Zip Co	ode	

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 = A	authorized Member		
Title	Name	Address	Type of Action
			□ Aðd
			□ Решоче
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Effective date	e, if other than the d	ite of filing:		200	(optional)	
Note: If the d	te is listed, the date must be ate inserted in this bloc	does not meet th	e applicable sta	ot filing or more than 9 tutory filing requires	o days after filing.) Pur ments, this date will	not be listed as
document's er	fective date on the Dep	imment of State's	records.			
	pecifies a delayed e day after the recor		but not an e	ffective time, at	12:01 a.m. on t	the earlier of
	r 17	202	0			
Dated Octobe	<u> </u>					

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00