

LD0000064348

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

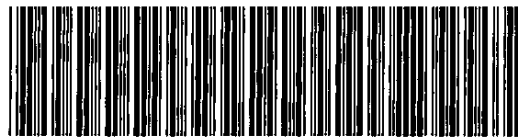
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

[Handwritten signature]

Office Use Only



900087705149

02/13/07--01002--011 **30.00

FILED
07 FEB 13 AM 2:32
SECRETARY OF STATE
TALLAHASSEE FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Wisdom Light Unlimited Company, 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:

Juliette Jones, MGRM

(Name of Person)

Wisdom Light Unlimited, LLC

(Firm/Company)

12301 Durango Ave

(Address)

North Port, FL 34287

(City/State and Zip Code)

For further information concerning this matter, please call:

Juliette Jones

(Name of Person)

at (941) 237-1195

(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)

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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

07 FEB 13 AM 2:32

FILED

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

Wisdom Light Unlimited Company, LLC

(Present Name)
(A Florida Limited Liability Company)

FIRST: The Articles of Organization were filed on 6/26/06 1:35 pm and assigned document number L06000064348.

SECOND: This amendment is submitted to amend the following:

name of the LLC changed to:

Wisdom Light Unlimited, LLC

Please make effective date the same

as original Articles 6/26/06 @ 1:35 pm

Dated 2/8/07

Signature of a member or authorized representative of a member

Juliette Jones, MGRM

Typed or printed name of signee

FILED
07 FEB 13 AM 2:32
SECRETARY OF STATE
TALLAHASSEE FLORIDA

Filing Fee: \$25.00