(Re	questor's Name)	
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PICK-UP	WAIT	MAIL
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Certified Copies	Certificates	s of Status
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G. MCLEOD

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EXAMINER



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SECRETARY OF SUCCESSION

COVER LETTER

TO: Registration Se Division of Cor		u.	·
süßject: 4What,	LLC		
		ited Liability Company)	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Alison Mosca		
		(Name of Person)	
	4What, LLC		
		(Firm/Company)	
	1040 Collier Center Way	, Ste. 15	
		(Address)	
	Naples, Florida 34110		
		(City/State and Zip Code)	
For further information of	concerning this matter, please c	all:	
Alison Mosca		at (239) 495-3010 x.103	
(Name of Person) (Area Code & Daytime Telephone Number)		elephone Number)	
Enclosed is a check for t	he 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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

4What, LLC			
(<u>Name of the Limited Liabili</u> (A Florida	ty Company as it now appears on our records. Limited Liability Company)	.,	
The Articles of Organization for this Limited Liability	Company were filed on March 19, 2008	and assign	ed
Florida document number L06000102791			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the lin	nited liability company here:		
The new name must be distinguishable and end with the we"L.L.C."	ords "Limited Liability Company," the designati-	on "LLC" or the abbr	reviatio
Enter new principal offices address, if applicable:		60	
(Principal office address MUST BE A STREET ADD	DRESS)	O9 MAR	33
		 ऽ ।	
Enter new mailing address, if applicable:		PH 23	
(Mailing address MAY BE A POST OFFICE BOX)		&	
B. If amending the registered agent and/or registered agent		ter the name of t	he nev
registered agent and/or the new registered office ad	<u>uress nere</u> :		
Name of New Registered Agent:			
New Registered Office Address:	/E.d, El., 1. de.	-4 -44)	
	(Enter Florida stre	ŕ	
	, Florid (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, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Richard J. Kent	835 Peters Road Casnovia, MI 49318	Add Remove
MGR	James Esch	4138 Skyway Drive Naples, FL 34113	Add Remove
			Add Remove
D. If ame	nding any other information,	enter change(s) here: (Attach additional sheets, if necessar	ry.)
<u>T</u>	his change became effective	September 30, 2008 however the amendment was not filed	in
2	008. When I filed the 2009 Ar	nnual Report instead of deleting Richard Kent I clicked char	ige
<u>tc</u>	show the new member Jame	s Esch. If the 2008 report is amended based on the inform	ation
<u>a</u>	bove then the 2009 needs to I	be amended as well to show the correct information.	
_			
Dated Mare	ch 2	<u>, 2009</u> .	
		MOSIA, Coxtfoller e of a member or authorized representative of a member	
	Alison Mos		
	· · ·	Typed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00