

L08000000L773

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

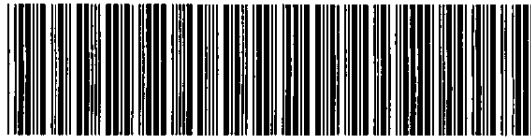
Special Instructions to Filing Officer:

Office Use Only

G. MCLEOD

OCT - 2 2008

EXAMINER



200136477612

10/01/08--01012--018 **25.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATION
08 OCT - 1 PM 2:26

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: WILLIAM WAYNE 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:

WILLIAM MEGINLEY
(Name of Person)

WILLIAM WAYNE LLC
(Firm/Company)

2216 SW 14TH PLACE
(Address)

CAPE CORAL FL 33991
(City/State and Zip Code)

For further information concerning this matter, please call:

WILLIAM MEGINLEY at 239 980 2919
(Name of Person) (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

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
08 OCT -1 PM 2:26

WILLIAM WAYNE 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 JAN 18, 2008 and assigned
Florida document number LD8000006773

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

N/A

The new name must be distinguishable and end with 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)

N/A

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:

N/A

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>	<u>Address</u>	<u>Type of Action</u>
MGR	WILLIAM MEGINLEY	2216 SW 14TH PL CAPE CORAL FL 33991	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Dated _____



Signature of a member or authorized representative of a member

9-21-08

Typed or printed name of signee

May 11, 2008

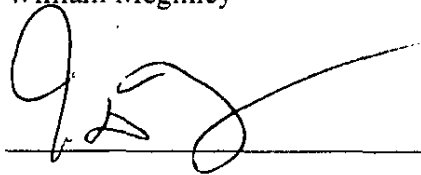
As of May 11, 2008, I, William Meginley have relinquished his day to day Manager status of William Wayne LLC due to being fully employed by another company. Any profit or loss as well as job related expenses of May 11, 2008 will be shared equally between Wayne Silverman and William Meginley. As for a go forward basis my compensation from William Wayne will be worked out by a job to job basis. Compensation could be from consulting or actual on the job labor hours.

Commitments made prior to May 11, 2008 will be shared equally between Wayne Silverman and William Meginley. Examples would be office phone, advertizing, liability insurance expense and accounting and tax obligations. Final financials to be prepared by an accounting professional.

As of May 11 2008, William Meginley has \$2500.00 invested into the company. An agreed upon minimum must be keep in the company to insure previous partnership obligations. Any checks disbursed for initial investment will be a return of capital investment unless an accounting professional states differently.

William Meginley

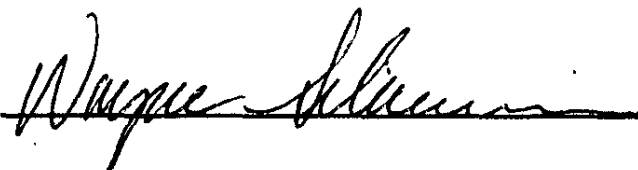
Date:



5-17-08

Wayne Silverman

Date:



5-17-08