

Dec. 22, 2015 3:59 PM No. 2445 Page 1 of 2
L080000009057

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To: Division of Corporations
Fax Number : (850) 617-6383

From: Account Name : PAUL A. KRASKER, P.A.
Account Number : 120090000078
Phone : (561) 801-7312
Fax Number : (561) 515-3904

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: pkrasker@kraskerlaw.com

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
RHONDA Y. WEISBERG, LLC**

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COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Rhonda Y. Weisberg 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:

Paul A. Kraker

Name of Person

Law Office of Paul A. Kraker

Firm/Company

501 South Flagler Drive, Suite 201

Address

West Palm Beach, FL 33401

City/State and Zip Code

pkraker@krakerlaw.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Paul Kraker

at (561) 515-2929

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

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41500030193 No. 2445 P. 3
**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

Rhonda Y. Weisberg, 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 1/23/2008 and assigned
Florida document number L08000009057.

This amendment is submitted to amend the following:

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

Weisberg Group LLC

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."

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

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 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

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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

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Change
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
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_____	_____	_____	<input type="checkbox"/> Change
_____	_____	_____	<input type="checkbox"/> Add
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_____	_____	_____	<input type="checkbox"/> Change
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Change

15 DEC 22 AM 9:54
FLORIDA

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

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

75 DEC 22 AM 9:54
ALL INFORMATION CONTAINED
HEREIN IS UNCLASSIFIED
DATE 05-10-2001 BY 60322
UCBAW

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(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

Dated

12/22, 2015

Thanda Weish
Signature of a member

Signature of a member or authorized representative of a member

RHONDA WEISBERG

Typed or printed name of signer

415000709777