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B. BOSTICK
MAR **1 2 2012**

EXAMINER

COVER LETTER

TO:	Registration Section Division of Corporation		•				
	Division of Corpor	ations	€.				
SUBJI	ECT: *		/A II, LLC				
		Name of Lim	ited Liability Company				
The en	closed Articles of Art	endment and fee(s) are sub	bmitted for filing.				
Please	return all corresponde	ence concerning this matter	to the following:				
			MARK WARDA	· ·	_		
			Name of Person				
		LAND TRU	IST SERVICE CORPORATION	N	-		
-			Firm/Company				
			PO BOX 186		_		
·			Address				
-		LA	KE WALES, FL 33859		. D.:	1	
			City/State and Zip Code			12 HAR	
•	_	F-mail address: (t	IARK@WARDA.NET to be used for future annual report notifical	ion	H.	in -	and and
For fur	ther information con-	erning this matter, please of	•	ion)		Q	Total designation of the second of the secon
roi iui	thei information cone	erning this matter, please of	zan:				774
	MAR	(WARDA	at (<u>863</u>)67	78-0011		福11:2	
	Name of Pe	rson	Area Code & Daytime T	elephone Numbe	r DITT		
Enclose	ed is a check for the f	ollowing amount:					
₽ \$25	.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$60.00 Fi Certifica Certified (addition	ate of Sta d Copy	atus &	losed)

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

	WA II, LLC			
(<u>Name of the Limited Liabil</u> (A Florid	ity Company as it now appea a Limited Liability Company)	irs on our records.)		
The Articles of Organization for this Limited Liability	Company were filed on	April 29, 2008	and assigned	
Florida document numberL08000042955	·			
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the li	mited liability company he	ere:		
The new name must be distinguishable and end with the w"L.L.C."	vords "Limited Liability Comp	any," the designation "L	LC" or the abbreviation	
Enter new principal offices address, if applicable:				
(Principal office address MUST BE A STREET AD)	DRESS)			
		<u></u>	<u>s. 5</u>	
Enter new mailing address, if applicable:			1 Sympath	
(Mailing address MAY BE A POST OFFICE BOX)			The state of the s	
	· · · · · · · · · · · · · · · · · · ·			
B. If amending the registered agent and/or regregistered agent and/or the new registered office ac		our records, enter 1	ne name of the nev	
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 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 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 Title <u>Address</u> <u>Name</u> **Type of Action** 123 N. CONGRESS AVENUE # 353 BOYNTON BEACH, FL 33426 <u>MGRM</u> BEKKERS, PETER ☐ Add **✓** Remove 123 N. CONGRESS AVENUE # 353 MGRM BEKKERS, PETRA BOYNTON BEACH, FL 33426 Remove 24 W. PARK AVE. MGR Warehouse Services Trust II ✓ Add LAKE WALES, FL 33853 Remove Remove $\prod Add$ Remove \square Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Article VI. Management is amended to read: Article VI. Management. This will be a manager-managed company. The current manager is Warehouse Services Trust II. Dated _____ FEBRUARY 2012 Signature of a member or authorized representative of a member PETER BEKKERS

Page 2 of 2

Filing Fee: \$25.00

Typed or printed name of signee