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SECRETARY OF STATE
FALLAHASSEE, FLORIDA

D. BRUCE

DEC 2 3 2009

EXAMINER

COVER LETTER

TO:	Registration S Division of Co				
SUBJECT:		W CAPITAL	GROUP 2924, LL	С	
			ited Liability Company		
The en	closed Articles o	of Amendment and fee(s) are sub	omitted for filing.		
Please	return all corresp	ondence concerning this matter	to the following:		
			GEORGE KAUPER Name of Person		
			Name of Ferson		
		W CA	PITAL GROUP 2924, Firm/Company	, LLC	
			("IIII/Company		
		3	180 STIRLING ROAD	<u> </u>	- 声: g
			Address		09 DEC 22 SECRETARY ALLAHASSE
		HO	LLYWOOD, FL 330	21	EC 22 AH LETARY OF HASSEE, F
			City/State and Zip Code		
		E-mail address: (t	kauper@gmail.com to be used for future annual rep	ort notification)	HIN: 00 OF STATE E. FLORID,
For fur	ther information	concerning this matter, please c	all:		00 ATE RIDA
		eorge Kauper	at (_954_)	374-8944	
	Name	of Person	Area Code &	Daytime Telephone Num	iber
Enclos	ed 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 e	Certif enclosed) Certif	Filing Fee, icate of Status & ied Copy ional copy is enclosed)
	Regis Divisi P.O. I	LING ADDRESS: tration Section ion of Corporations Box 6327 nassee, FL 32314	Registration Division of Clifton Bui	Corporations	:

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

W Capital Grou (Name of the Limited Liability Compan (A Florida Limited Limi	p 2924, LLC y as it now appears on our records. ability Company)
The Articles of Organization for this Limited Liability Company Florida document number <u>LOBOOO99398</u> .	were filed on 10/22/2008 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabi	lity company here:
The new name must be distinguishable and end with the words "Limit "L.L.C."	ed Liability Company," the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	LL 209 D
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered off	ASSEE, FLORING
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 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>	Address	Type of Action
MG.RN.	R HAR-ZVI, LEA	3180 Stirling 1 HIWA, FU	Remove
MGRM	BAR-NOACH, TA	REMOVE	Add Remove
M <u>GRN</u>	WOLFF, YAIR	3180 Stirling Ro HIWA, FC 33	A BAND CHANG DROMOVE Address Only
			Add Remove
			AddRemove
			Add Remove
D. If ame		change(s) here: (Attach additional sheets, if	necessary.)
-	Please chance	ge the address	
_	on record	for MGRM Yai	v Wolffa
_	to 3180 Stirlir	ng Rd	TASIA TO
	HING, FC	33021	22 22
-			Trong Trong
Dated	December 15 ,	2009	00
	Signature of a m	ember or authorized consesentative of a member	
		Typed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00