L09000055749

| (Re | equestor's Name) | | | |
|---|--------------------|-----------|--|--|
| (Ad | dress) | | | |
| (Ad | ldress) | | | |
| . (Cit | ty/State/Zip/Phone | e #) | | |
| . PICK-UP | ☐ WAIT | . MAIL | | |
| (Bu | siness Entity Nan | ne) | | |
| (Do | ocument Number) | | | |
| Certified Copies | Certificates | of Status | | |
| Special Instructions to Filing Officer: | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |

Office Use Only



000249107130

000249107130 06/24/13--01056--011 **25.00

FILES

3 JUN 24 PH 4: 30
SECRETARY OF STATE
SECRETARY OF STATE

C. LEWIS
JUN 2 6 2013
EXAMINER

COVER LETTER

| Division of Corporations | | | | | | 3.11 | | | e: |
|--|-------|----|-------|-----------------------|-------------------------------|------|---|----|--------|
| SUBJECT: LAWRENCE W.J. LEC Name of Limited Liability Company | · Pa. | ** | Selek | 1 25 14 0 g | a r √ ¹⁸ Sr | Ng. | * | 7, | |
| • | | | | | | | | | |

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

| Betty Prince | |
|--|---|
| Name of Person | |
| Firm/Company | |
| 11211 81st Court North | |
| West Palm Beach, FL 33413 | 5 |
| betty oring a live . Com E-plaif oddress: (to be used for future annual report notification) | |
| | |

For further information concerning this matter, please call:

Betty Prince at 561 232-8370

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

\$25.00 Filing Fee

TO:

Registration Section

☐\$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

| LAWRENCE WZ, LLC | |
|--|--------------|
| (Name of the Limited Liability Company as it now appears on or | ar records.) |
| (A Florida Limited Liability Company) | · |

PLED

13 JUN 24 PM 4: 30

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on <u>06/08/2009</u> and assigned Florida document number <u>L0900055749</u>

This amendment is submitted to amend the following:

| A. | If amending | name, enter the | new name of the | <u>e limited liability</u> | company here |
|----|-------------|-----------------|-----------------|----------------------------|--------------|
| | | | | | |

| The new name must be distinguishable and end with the "L.L.C." | e words "Limited Liability Company," | the designation "LLC" or the abbreviation |
|--|--------------------------------------|---|
| Enter new principal offices address, if applicable | <u></u> | |
| (Principal office address MUST BE A STREET A | DDRESS) | |
| | | |
| Enter new mailing address, if applicable: | _ | |
| (Mailing address MAY BE A POST OFFICE BO) | <u> </u> | |
| B. If amending the registered agent and/or registered agent and/or the new registered office | | records, enter the name of the nev |
| Name of New Registered Agent: | | |
| New Registered Office Address: | Enter F | lorida 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

Page 1 of 3

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 = Mai MGRM M | nager Ianaging Member | | | Estu |
|---------------------|--------------------------|---------------------------|---------------|---|
| <u>Title</u> | <u>Name</u> | Address | ype of Action | ALED 12 |
| MGR | Betty Prince | 11211 815 Court N. | Add | 13 JUN 24 PH 4: 30 |
| | • | West Palm Beach, FL 334/6 | Remove | SECRETARY OF STATE TALLAHASSEE, FLORIDA |
| m <u>erm</u> | Arlene Weinsier | 4561 olde Perimeter | _ (Add) | |
| | | unit 1402 | Remove | |
| | | Atlanta, GA 30341 | ø | |
| mgr | Adele Prince | 11211 815 Court North | _ Add | |
| • | | West Palm Beach, FL 33 | 412 Remove | |
| - | | | | |
| | | | Add | |
| | | | Remove | |
| | | | | |
| | | | Add | |
| | | | Remove | |
| | | | | |
| | | | Add | |
| | | | Remove | |

Page 2 of 3

| D. If amending any | other information, enter change(s) here: (Attach additional sheets, if necessary.) | |
|--------------------|--|---|
| | | EIL EID |
| | | _ 13 JUN 24 PM 4: 30 |
| Dated 6-19 | 1-2013 | SECRETARY OF STATE TALLAHASSEE, FLORIDA |
| | Signature of a member or authorized representative of a member | |
| Ric | hard Prince Trustee Typed or printed name of signee | |

Page 3 of 3
Filing Fee: \$25.00