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T. HAMPTON SEP - 1 2009

EXAMINER

## **COVER LETTER**

TO: Registration S Division of Co					
SUBJECT:	WPB	Group, LLC			
		ted Liability Company			
The enclosed Articles o	f Amendment and fee(s) are sub	omitted for filing.			
Please return all corresp	ondence concerning this matter	to the following:			
	Stan Olszewski				
		Name of Person			
		WPB Group, LLC			
		Firm/Company			
		Address			
Lantana, FL 33462 City/State and Zip Code					
For further information	concerning this matter, please of	eall:			
St	an Olszewski	4(	13-5777		
Name	of Person	Area Code & Daytime 1	Celephone 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		STREET/COURIE Registration Section	R ADDRESS:		

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

WPB Gro	up, LLC			
( <u>Name of the Limited Liability Compa</u> (A Florida Limited L	ny as it now appear liability Company)	rs on our records.)		
The Articles of Organization for this Limited Liability Company were filed on and				
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liab	ility company her	<u>·e</u> :		
The new name must be distinguishable and end with the words "Limi"L.L.C."	ited Liability Compa	any," the designation '	'LLC" or the a	abbreviation
Enter new principal offices address, if applicable:	The Harvard Business Services			
(Principal office address MUST BE A STREET ADDRESS)	16192 Coast	al Highway	9	_ <u>≷</u> ∽
	Lewes, DE 1	19958-9776		922 222
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)			31 AM11: 4	FILED STATE
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her		our records, <u>enter</u>	the name o	of the nev
Name of New Registered Agent:				
New Registered Office Address:	En	ter Florida street ad	ldress	
·		, Florida		
	City		Zip Code	2

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 Type of Action Address Title Name Stanley N. Olszewski, Jr. MGR ☐ Add
✓ Remove 635 Gator Dr. Suite G Lantana, FL 33462 Lizabeth R Olszewski 635 Gator Dr., Suite G Lantana, FL 33462 MGRM ☐ Add Remove MGR Masters III, LLC Harvard Business Services ✓ Add ☐ Remove 16192 Coastal Highway Lewes DE 19958-9776. Add Remove  $\square$ Add Remove  $\prod$ Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) LLC is now owned by an organization, not an individual. Masters III federal ID number is 27-0633378. August 24 porized representative of a member Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00