# 109000084190

(	(Requestor's Name)
	(Address)
	(Address)
	(City/State/Zip/Phone #)
PICK-UF	P WAIT MAIL
	(Business Entity Name)
	(Document Number)
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# **COVER LETTER**

TO:	Registration Se Division of Cor			
CI ID II	WIGGY, L	LC		
SUBJI		Name of Limi	ited Liability Company	
		Amendment and fee(s) are sub		
Please	return all correspo	ndence concerning this matter	to the following:	
		Cecilia Brannon		
			Name of Person	
		Law Offices of Kravitz and	d Guerra, P.A.	
			Firm/Company	<del></del>
		801 Brickell Bay Dr. Suite	801	
			Address	
		Miami, FL 33131		
		cecilia@kravitzlaw.com	City/State and Zip Code	
		E-mail address: (	to be used for future annual report notif	fication)
For fur	ther information c	oncerning this matter, please ca	all:	
Cecitia	a Brannon		305 372-0222 at ( )	
	Name o	f Person		e Telephone Number
Enclos	ed is a check for th	ne following amount:		
\$2	5.00 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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

WIGGY, LLC		
( <u>Name of the Limited Liabil</u> (A Florid	ity Company as it now appears on our records.) la Limited Liability Company)	
The Articles of Organization for this Limited Liability (Florida document number L09000084190	Company were filed on August 31st, 2009	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lim	nited liability company here:	
The new name must be distinguishable and contain the words "Lin	nited Liability Company," the designation "LLC" or t	hetabbrevistion "L.L.C."
Enter new principal offices address, if applicable:		运输 名 丁
(Principal office address MUST BE A STREET ADD)	RESS)	3 5 15
Enter new mailing address, if applicable:		3. S.
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or regiregistered agent and/or the new registered office add		ter the name of the
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	F1_23.	_
	, Florida	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

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>	Address	Type of Action
MGR	MARCO NOGUEIRA	6034 Pine Tree Dr.	
		Miami Beach, FL 33140	
			Remove
			🚾 Change
MGR	CRISTIANE NOGUEIRA	6034 Pine Tree Dr.	<b>5</b>
		Miami Beach, FL 33140	
		<u>-                                    </u>	□ Remove
			Change
			Add `
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ffective date, if other than the date of filing: an effective date is listed, the date must be specific and cannot be prior to date of filing	(optional) or more than 90 days after filing.) Pursuant to 605.02
ote: If the date inserted in this block does not meet the applicable statutory ocument's effective date on the Department of State's records.	filing requirements, this date will not be listed a
e record specifies a delayed effective date, but not an effection.  The 90th day after the record is filed.	ve time, at 12:01 a.m. on the earlier
August 6th 2018	a ha
IIII	

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Typed or printed name of signec

Filing Fee: \$25.00