L09000 104373

(Re	questor's Name)	
(Ad	idress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
,	,	,
PICK-UP	WAIT	MAIL
(Bu	isiness Entity Nar	ne)
(Do	ocument Number)	_
Certified Copies	_ Certificates	s of Status
		
Special Instructions to	Filing Officer:	
L		





700349508767

08/10/20--01038--010 *+25.00

2027 11 3 10 PM 2: 0#

US 1011/20



COVER LETTER

Tallahassee, FL 32314

TO: Registration So Division of Con				
Emily's Wo	orld, LLC	•		
SUBJECT:	Name of Lim	ited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please return all correspo	ondence concerning this matter	to the following:		
	Tommy D. Permenter, Jr.,	Esquire		
		Name of Person		
	The Permenter Law Firm,	P.A.	3572	
	Firm/Company			
2201 S.E. 30th Avenue, Suite 202				
		Address	7.	
	Ocała, Florida 34471		ode nual report notification) 622-181.1 Daytime Telephone Number	
		City/State and Zip Code		
	Tommy@Permenterlaw.com	n		
	E-mail address: (to be used for future annual report no	otification)	
For further information of	concerning this matter, please ca	all:		
Tommy D. Permenter, J	r., Esquire			
Name o	of Person	at () Area Code Dayti	me Telephone Number	
Enclosed is a check for t	he 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		<u>Street Address:</u> Registration S	ection	
Division of (Division of Co		
P.O. Box 632		The Centre of		

2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Emily's World, LLC		
(Name of the Limited Liabil (A Florid	lity Company as it now appears on our record la Limited Liability Company)	<u>s.</u>)
he Articles of Organization for this Limited Liability (Company were filed on October 29, 2009	and assigned
lorida document number L09000104373	<u> </u>	
his amendment is submitted to amend the following:		
. If amending name, enter the new name of the lin	nited liability company here:	
WM Clark Family Holdings, LLC		• •
he new name must be distinguishable and contain the words "Lir	nited Liability Company," the designation "LLC	" or the abbreviation "L.L.C."
nter new principal offices address, if applicable:		<u></u>
Principal office address MUST BE A STREET ADD	RESS)	<u> </u>
		Ď.,
		-%
nter new mailing address, if applicable:		0.5
Mailing address MAY BE A POST OFFICE BOX)		
s. If amending the registered agent and/or registere	=	the name of the new regis
gent and/or the new registered office address here:	·	
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street addres	s
	. Fl	orida
	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 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
			☐Add
			Remove
			Change
			□Add
	·		Remove
			CChange
			.☐Remove
			□Change
***************************************			□ Add
			Remove
			☐ Change
			□Add
			□Remove
			Change
<u>.</u>			□Add
		-	
			[]Change

			· · · · · · · · · · · · · · · · · · ·			*****************************	
				• •			
				 			
							
	······································						
						·	
		•				1 mg 1	
						· · · · · · · · · · · · · · · · · · ·	
						• •	
							
						13	
	· · · · · · · · · · · · · · · · · · ·						
						23	
	· · · ·						
	. , , ,						
n effectiv <u>te:</u> If t	date, if other than we date is listed, the date he date inserted in the 's effective date on the	must be specific is block does no	and cannot be prion of meet the appli	cable statutory	or more than 90 da filing requiremer	(optional) ys after filing.) Pursuar nts, this date will not	nt to 605.020 be listed a
is filed.					.m. on the earlie	r of: (b) The 90th d	ay after the
ted	Huenot	5 th					
		1. 1	W Mash	_			
		Haines 1	1. Ceare	-	ative of a member		
	/	 Jignature o 	i a member or auth	iorizca represent	auve of a memoer		
	/	/		_	•		