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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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MAIL

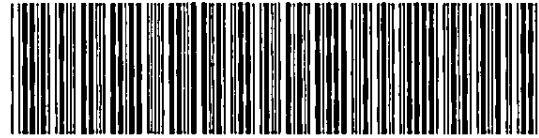
(Business Entity Name)

(Document Number)

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17 DEC -6 AM 7:27
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: WC GRAND LLC

Name of Limited Liability Company

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

Please return all correspondence concerning this matter to the following:

David N. Ferri

Name of Person

DF Garrett Construction, LLC

Firm/Company

101 N. Woodland Blvd., Suite 201

Address

DeLand, FL 32720

City/State and Zip Code

dferri@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

David N. Ferri

Name of Person

407 875-0800
at (_____) _____
Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|---|---|--|--|
| <input type="checkbox"/> \$25.00 Filing Fee | <input checked="" type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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**

WC Grand LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 12/02/2009 and assigned Florida document number 1.09000114921.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

101 N. Woodland Blvd., Suite 201

DeLand, FL 32720

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

101 N. Woodland Blvd., Suite 201

DeLand, FL 32720

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

David N. Ferri

New Registered Office Address:

670 N. Orlando Ave., Suite 200

Enter Florida street address

Maitland

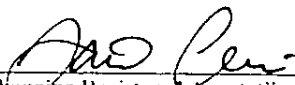
City

Florida

Zip

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>	<u>Address</u>	<u>Type of Action</u>
AMBR	DF Garrett Construction, LLC	101 N. Woodland Blvd.	<input checked="" type="checkbox"/> Add
		Suite 201	<input type="checkbox"/> Remove
		DeLand, FL 32720	<input type="checkbox"/> Change
MGR	David N. Ferri	101 N. Woodland Blvd.	<input checked="" type="checkbox"/> Add
		Suite 201	<input type="checkbox"/> Remove
		DeLand, FL 32720	<input type="checkbox"/> Change
MGR	M. Brandon Garrett	101 N. Woodland Blvd.	<input checked="" type="checkbox"/> Add
		Suite 201	<input type="checkbox"/> Remove
		DeLand, FL 32720	<input type="checkbox"/> Change
MGRM	White Challis Holdings, LLC	112 Orange Ave	<input type="checkbox"/> Add
		Suite 204	<input checked="" type="checkbox"/> Remove
		Daytona Beach, FL 32114	<input type="checkbox"/> Change
MGR	John C. White	112 Orange Ave	<input type="checkbox"/> Add
		Suite 203	<input checked="" type="checkbox"/> Remove
		Daytona Beach, FL 32114	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)


[This section contains horizontal lines for amendments, which have been crossed out with a large diagonal line.]

17 DEC - 6 AM 7:27
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

E. Effective date, if other than the date of filing: 11/30/2017 (optional)
(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:
(b) The 90th day after the record is filed.

Dated NOVEMBER 30th , 2017


Signature of a member or authorized representative of a member

David N. Ferri

Typed or printed name of signee