L10000/8472

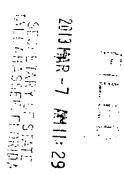
(Re	questor's Name)	
(Ad	dress)	
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PICK-UP	MAIT WAIT	MAIL
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Certified Copies	_ Certificates	s of Status
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COVER LETTER

TO: Registration Sec Division of Corp			
SUBJECT: W	2 DRYWALL Name of Limite	FINISHING &	LC
The enclosed Articles of A	mendment and fec(s) are sub-	nitted for filing.	
Please return all correspon	dence concerning this matter t	to the following:	
		RODRIGUES Name of Person ALL FINISHING Firm/Company	
	625 83rd	STREET #4	5
	MIAMI BEA	City/State and Zip Code ques Dhotmail. C the used for future annual report noti	7382 PR -7 M1: 29
For further information co	ncerning this matter, please ca		
WILLIAM Name of	Person	at (<u>786)</u> 942– Area Code & Daytin	7382 55 29 ne Telephone Number
Enclosed is a check for the	e following amount:		
\$25.00 Filing Fee	□\$30.00 Filing Fee & Certificate of Status	□\$55.00 Filing Fee & Certified Copy	□\$60.00 Filing Fee, Certificate of Status &

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Certified Copy

(additional copy is enclosed)

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

(additional copy is enclosed)

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

WE DRYWALL F	INISHING LLC	
(<u>Name of the Limited Liability</u> (A Florida l	Company as it now appears on ou Limited Liability Company)	<u>r records.</u>)
The Articles of Organization for this Limited Liability C	Company were filed on $02/1$	8/2010 and assigned
Florida document number <u>L100 000 18 47</u>		
This amendment is submitted to amend the following:		
_		
A. If amending name, enter the new name of the lim	ited liability company here:	
WR CONTRACTING	LLC	
The new name must be distinguishable and end with the wor	rds "Limited Liability Company," the	e designation "LLC" or the abbreviation
"L.L.C."		
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDI	RESS)	
		1
Enter new mailing address, if applicable:		5 5 =
3		<u> </u>
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or regis	tored office address on our re-	nords anter the name of the new
registered agent and/or the new registered office add		eords, enter the name of the new
	····	
Name of New Registered Agent:		
Name of New Registered Agent.		
New Registered Office Address:		
	Enter Flo	rida 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

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 Title **Address** <u>Name</u> Remove TO Remove Remove

If an	nending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
d	MAR 1, 2013.
	Millim
	Signature of a member of authorized representative of a member
	WILLIAM ROORIGUES
	Typed or printed name of signec

Page 3 of 3

Filing Fee: \$25.00

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