L10000029090

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAI	L
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	
•	

Office Use Only



100176761631

04/22/10--01023--005 **25.00

FILED

10 APR 22 PH 3: 44

LUNCIARY OF STATE
TAIL AHASSEE, FLORIDA

S. HAWKES

APR 2 3 2010

EXAMINER

COVER LETTER

TO:	Registration Sec Division of Corp			
SUBJI	ECT:	. WI	LCIN, LLC	
5020			ited Liability Company	
The en	nclosed Articles of A	mendment and fee(s) are su	bmitted for filing.	
Please	return all correspon	dence concerning this matte	r to the following:	
RICHAF			ARD M. MOGERMAN, E	SQ.
		RICHA	ARD M. MOGERMAN, F	P.A.
		8211 WEST BF	ROWARD BOULEVARD), SUITE 200
		PLAN	ITATION, FLORIDA 333	324
			City/State and Zip Code	
		notification)		
For fu	rther information co	ncerning this matter, please	call:	
	Richard M.	Mogerman, Esq.	at (954) Area Code & D	475-7171 aytime Telephone Number
	sed is a check for the	-		
√ \$25	5.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enc	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Registrat Division P.O. Box	IG ADDRESS: ion Section of Corporations 6327 see, FL 32314	Registration S Division of Co Clifton Buildi	orporations

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	WILCIN, LLC			
(Name of the Limited (A	Liability Company as it now appears Florida Limited Liability Company)	on our records.)		
(o. a zamen, company,			
The Articles of Organization for this Limited Lia	ability Company were filed on	03/16/2010 and assigned		
Florida document numberL10000029	090	11 / 12 / 12 / 12 / 12 / 12 / 12 / 12 /		
		0 G		
This amendment is submitted to amend the follo	wing:			
	_	5 90 E		
A. If amending name, enter the new name of	the limited hability company here:	Contract of the second		
	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	A THE STATE OF THE		
The new name must be distinguishable and end with "L.L.C."	n the words "Limited Liability Company	," the designation "LLC" or the appreviation		
Enter new principal offices address, if applica	able:			
(Principal office address MUST BE A STREET	T ADDRESS)			
		· · · ·		
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE I	B <i>OX</i>)			
		·		
B. If amending the registered agent and/o		r records, enter the name of the new		
registered agent and/or the new registered off	fice address here:			
Name of New Registered Agent:				
New Registered Office Address:				
	Enter Florida street address			
	. Florida			
	City	Zip Code		
N. W. J. N. N. N. N. N. N. N. N				

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, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager MGRM = Managing Member							
<u>Title</u>	<u>Name</u>	Address	Type of Actio				
MGRM	Carlos W. Suarez Hurtado	Av Beni 277, Of 107 y 112 Condominia Casa Grande Santa Cruz - Boliva	Add Add A				
<u>MGRM</u>	Cintia Fernandez Hurtado	Av Beni 277, Of 107 y 112_Condominio Casa Grande Santa Cruz - Boliva	☐ Add ☑ Remove				
MGRM	Carlos W. Suarez Morales	Av Beni 277, Of 107 v 112_Condominio Casa Grande Santa Cruz - Boliva	✓ Add _ Remove				
MGRM	Cinthia Fernandez Hurtado	Av Beni 277, Of 107 y 112_Condominio Casa Grande Santa Cruz - Boliva	√ Add □ Remove				
			Add Remove				
			Add Remove				
D. If amending	g any other information, enter change(s) here: (Attach additional sheets, if necessary.)	-				
			-				
Dated	April 21 P010						
_	Signature of a member or authorized representative of a member Richard M. Mogerman						
Typed or printed name of signee							

Page 2 of 2

Filing Fee: \$25.00