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D. BRUCE

OCT 29 2010

EXAMINES

COVER LETTER

TO:	Registration Sect Division of Corpo				
SUBJE	CCT:	WHR	Sales, LLC		
50201		Name of Limit	ed Liability Company		
The en	closed Articles of A	mendment and fee(s) are sub	mitted for filing.		
Please	return all correspond	dence concerning this matter	to the following:		
		William	B. Hart, Registered Agent		
			Name of Person		
			WHR Sales, LLC		
			Firm/Company		
			3400 Broadway	F.1.	
			Address		
		Riv	riera Beach , FL 33404		77
			City/State and Zip Code		r ichtera ,
		bil	l@ olachampcar.com o be used for future annual report notifical	E E	
For fu	rther information co	e-mail address: (t neerning this matter, please c	·	ORDA	フ
	William B. Ha	rt, Registered Agent	at (561) 37	71-3700	
	Name of		Area Code & Daytime T	elephone Number	
Enclos	sed is a check for the	following amount:			
\$25	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)	
		NG ADDRESS: tion Section	STREET/COURIE Registration Section	R ADDRESS:	

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

WHF	R SALES, LLC			
(<u>Name of the Limited Liability</u> (A Florida L	Company as it now appoint in the Liability Company	ears on our records.)		
-	ompany were filed on	August 20, 2010	and as	signed
Florida document numberL10000087474	_·			
This amendment is submitted to amend the following:				
WHR SALES, 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				
The new name must be distinguishable and end with the word 'L.L.C."	ds "Limited Liability Com	npany," the designation "	'LLC" or the	abbreviati
Enter new principal offices address, if applicable:				
Principal office address MUST BE A STREET ADDR	ESS)			<u>. </u>
			AND DO	-
Enter new mailing address, if applicable:			m - m -<	
Mailing address MAY BE A POST OFFICE BOX)			F S T	5
		our records, <u>enter</u>	the name	of the no
Name of New Registered Agent:				
New Registered Office Address:				
	•	Enter Florida street ad	dress	
	City	, Florida	Zip Coa	lo
	City		zip coa	

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

<u>Title</u> Name | **Address** Type of Action MGRM William B. Hart 1149 North Harbor Drive ✓ Add Signer Island, FL 33404 ☐ Remove ☐ Add Remove ☐ Add Remove Remove □Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) October 18 2010 Dated ____ Signature of a member or authorized representative of a member LANDER, STROUBE WII, MGRM Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00