## L10000094902

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status

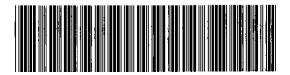
Special Instructions to Filing Officer:

A. LUNT

NOV 30 2010

**EXAMINER** 

Office Use Only



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10 NOV 30 AM 9:52 SECRETARY OF STATE TABLAHASSEE, FLORIBA



November 24, 2010

KURT WESTFIELD 8825 CHESTERTON PL TAMPA, FL 33635

SUBJECT: WC EQUITY GROUP, LLC

Ref. Number: L10000094902

We have received your document for WC EQUITY GROUP, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6094.

Agnes Lunt Regulatory Specialist II

Letter Number: 010A00027605

## **COVER LETTER**

TQ:

TQ:	Registration Sect Division of Corpo				
SUBJI	ECT:	WC EQU	IITY GROUP, LLC		
			nited Liability Company	<del></del>	_
Tri		10 ()	1 10		
		mendment and fee(s) are so dence concerning this matte	-	filing.  Diving:  VESTFIELD  of Person  Y GROUP, LLC  //Company  STERTON PL  ddress  JANA JONES SEE  And Zip Code  SING@GMAIL.COM  of future annual report notification)  Area Code & Daytime Telephone Number  Division of Corporations  STREET/COURIER ADDRESS:  Registration Section  Division of Corporations	
	•	J	J		
			KURT WESTFIELD		
			Name of Person		
		W	C EQUITY GROUP, LLC		<u>_</u>
			rimi/Company		
		8825 CHESTERTON PL		TAE SEC	
			Addiess		三
		TAMPA, FL 33635 City/State and Zip Code			- SSE
		WESTFIELDHOUSING@GMAIL.COM			E, FL
	·		(to be used for future annual report ne	otification)	ON SE
For fur	ther information con-	cerning this matter, please	call:		7
		WESTFIELD	at ( 813 )		
	Name of Po	erson	Area Code & Day	time Telephone Num	ber
Enclose	ed is a check for the t	following amount:			
\$25	.00 Filing Fee [	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certif sed) Certif	icate of Status & ied Copy
	Registration of P.O. Box	G ADDRESS: on Section of Corporations 6327 ee, FL 32314	Registration Sec	ction porations	:

Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

WC EQUITY (	GROUP, LLC			
(Name of the Limited Liability Compar (A Florida Limited L	ny as it now appears on o Liability Company)	our records,)	-	
The Articles of Organization for this Limited Liability Company Florida document numberL1000094902	were filed on09	9/10/2010	_ and assigned	i
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liab	ility company here:			
The new name must be distinguishable and end with the words "Limi"L.L.C."	ted Liability Company," tl	he designation "LL	C" or the abbrev	viation
Enter new principal offices address, if applicable:	711 S. HOWARD	#200	<b></b>	1
(Principal office address MUST BE A STREET ADDRESS)	TAMPA, FL 33606	AND SEC	0	
Enter new mailing address, if applicable:	711 S. HOWARD	11/	F LED	· · · · · · · · · · · · · · · · · · ·
(Mailing address MAY BE A POST OFFICE BOX)	TAMPA, FL 33606	) OF	9. 5 <b>2</b>	
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here  Name of New Registered Agent:  New Registered Office Address:  Tampa	t Westfie - Howard	ld	ss of the state of	new

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, Lhereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

MGR = Mai MGRM = M	nager Ianaging Member		
Title	<u>Name</u>	Address	Type of Action
WGRM	Kurt Westfield	711 S. Howard #200 Tampa, Ft	Add Remove
MGRM	Brian Crowe	7/15- Horard #200	Add Remove
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		D	Remove
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			Remove
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D. If amend	ing any other information, enter char	nge(s) here: (Attach additional sheets, if necessary.)	<del></del>
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Dated	,	*	·
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Page 2 of 2

Filing Fee: \$25.00