

(Re	equestor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phone	· #)
PICK-UP	WAIT	MAIL
(Bu	isiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only

G. MCLEOD

NOV 27 2012

EXAMINER



000242076800

11/26/12--01012--010 **25.00

COVER LETTER

TO:

Registration Section
Division of Corporations

SUBJECT: WC EQUITY GROUP, LLC

WC ASSETS, LCC

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:

KURT WESTFIELD

Name of Person

WC ASSETS

Firm/Company

3030 N. ROCKY POINT SUITE 150

Address

TAMPA, FL 33607

City/State and Zip Code

INFO@WCASSETS.COM

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

For further information concerning this matter, please call:

KURT WESTFIELD

₃₁,813,4046916

Name of Person

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

■ \$25.00 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)

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 ASSETS, LLC				
(Name of the Limited	I Liability Compa A Florida Limited I	ny as it now appears on our recor Liability Company)	<u>'ds.</u>)	
The Articles of Organization for this Limited I	iability Company	were filed on 01/03/2011	and assigned	
Florida document number L11000000113				
This amendment is submitted to amend the following	lowing:			
A. If amending name, enter the new name of	of the limited liab	ility company here:		
The new name must be distinguishable and end wi"L.L.C."	ith the words "Limi	ited Liability Company," the design	ation "LLC" or the abbreviation	
Enter new principal offices address, if applicable:		3030 N. ROCKY POINT		
(Principal office address MUST BE A STREET ADDRESS)		SUITE 150	no	
		TAMPA, FL 33607	元 7	
Enter new mailing address, if applicable:		3030 N. ROCKY POINT	NOV 26	
(Mailing address MAY BE A POST OFFICE BOX)		SUITE 150	(F)	
		TAMPA, FL 33607	54 5	
B. If amending the registered agent and registered agent and/or the new registered of			enter the name of the new	
Name of New Registered Agent:	KURT WES	KURT WESTFIELD		
New Registered Office Address:	3030 N. RC	OCKY POINT SUITE 150		
		Enter Florida str	eet address	
	TAMPA Florid		_{ida} <u>33607</u>	
		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

<u>Title</u>	Name	Address	Type of Action
MGRM	KURT WESTFIELD	3030 N. ROCKY POINT	Add
		SUITE 150	Remove
		TAMPA, FL 33607	
			Add
			Remove
			Add
			Remove
			<u> </u>
			Add
			Remove
			_
			Add
			Remove
			Add
			Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
ONLY ITEMS BEING AMENDED ARE ADDRESS.
FROM: 711 S. HOWARD
TO: 3030 N. ROCKY POINT
OUR OFFICE LOCATION HAS MOVED.
THANK YOU.
Dated NOVEMBER 2012
Signature of a member or authorized representative of a member
KURT WESTFIELD
Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00