

L11000034611

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

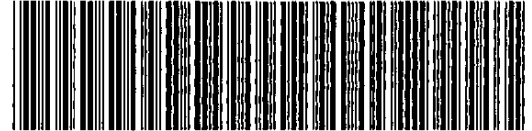
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



200200824162

04/08/11--01022--010  
\*30.  
FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
11 APR - 8 PM 1:02

N. Culligan APR 11 2011

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT: DYNAMICA DEVELOPMENT INTERNATIONAL, LLC**  
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:

WILLIAM A LAI

Name of Person

WLAI, LLC

Firm/Company

888 BISCAYNE BLVD, STE 101

Address

MIAMI, FL 33132

City/State and Zip Code

WLAI@DYNAMICASTUDIO.COM

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

For further information concerning this matter, please call:

WILLIAM LAI

Name of Person

at ( 305 )

376.8889

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

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
11 APR -8 PM 1:02

DYNAMICA DEVELOPMENT INTERNATIONAL, 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 03/22/2011 and assigned  
Florida document number L11000034611.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

WLAI, LLC

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

**Enter new principal offices address, if applicable:**

888 BISCAYNE BLVD, STE 101

**(Principal office address MUST BE A STREET ADDRESS)**

MIAMI, FL 33132

**Enter new mailing address, if applicable:**

888 BISCAYNE BLVD, STE 101

**(Mailing address MAY BE A POST OFFICE BOX)**

MIAMI, FL 33132

**B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:**

Name of New Registered Agent:

WILLIAM LAI

New Registered Office Address:

888 BISCAYNE BLVD, STE 101

*Enter Florida street address*

MIAMI

*City*

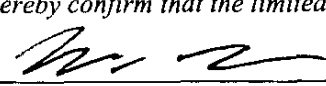
Florida

33132

*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>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	ROBERT GORLOW	7485 FAIRWAY DRIVE STE 430 MIAMI LAKES, FL 33014	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	OLGA PIZZI	888 BISCAYNE BLVD STE 101 MIAMI, FL 33132	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Dated APRIL 4, 2011

\_\_\_\_\_  
Signature of a member or authorized representative of a member

WILLIAM A LAI

\_\_\_\_\_  
Typed or printed name of signee

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
11 APR - 8 PM 1:09