## L11000092509

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
	siness Entity Nar - 92509 cument Number)	
Certified Copies	_ Certificate	s of Status
Special Instructions to	Filing Officer:	

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## **COVER-LETTER**

TO:	Registration So Division of Cor			·	
SUBJI	ECT:	WIZ HO	DLDINGS, LLC		
		Name of Limi	ted Liability Company		
The en	closed Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please	return all correspo	ondence concerning this matter	to the following:		
			ROGER L. TOVAR		
			Name of Person		
		R0	OGER L. TOVAR P.A.		
			Firm/Company	<del> </del>	
			2205 SW 129 CT		
			Address		
			MIAMI, FL 33175		
			City/State and Zip Code		
			ERTOVAR@GMAIL.COI to be used for future annual report r		
For fur	ther information of	concerning this matter, please c	all:		
		SER L. TOVAR	at ( 786 )	285-4669	
	Name o	f Person	Area Code & Day	ytime Telephone Number	
Enclos	ed is a check for the	he following amount:			
<b>\$25</b>	i.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	✓\$55.00 Filing Fee & Certified Copy (additional copy is enclo	osed) Certified	of Status &

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



October 23, 2012

ROGER L. TOVAR, P.A. 2205 SW 129 COURT MIAMI, FL 33175

SUBJECT: WIZ HOLDINGS, LLC Ref. Number: L11000092509

We have received your document for WIZ HOLDINGS, LLC and your check(s) totaling \$55.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

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) 245-6051.

Letter Number: 212A00026013

Neysa Culligan Regulatory Specialist II

www.sunbiz.org

## ARTICLES OF AMENDMENT TO - ARTICLES OF ORGANIZATION **OF**

FILED

12 NOV -

			ı Ç Ņ	108 -5 AM 9: 44	
	WIZ HOLDI	NGS, LLC	Die Ch	IT BY OF CT.	
(Name of the Limited (A	<u>Liability Compa</u> Florida Limited I	ny as it now appears Liability Company)	on our records A	HASSEE, FI ORIDA	
· ·		3 1 37		V. COMDA,	
The Articles of Organization for this Limited Lia	ability Company	were filed on	08/11/2011	and assigned	
Florida document number L11000092	509				
	_				
This amendment is submitted to amend the follo	wing:				
	-				
A. If amending name, enter the new name of	the limited liab	ility company here	•		
The new name must be distinguishable and end with 'L.L.C.'	the words "Limi	ited Liability Compan	y," the designation "L	LC" or the abbreviation	
Enter new principal offices address, if applicable:		18201 COLLINS AVENUE #1406			
(Principal office address MUST BE A STREE)	T ADDRESS)	SUNNY ISLES, FL 33160			
		<del></del>			
Enter new mailing address, if applicable:		18201 COLLIN	IS AVENUE #14	06	
5		SUNNY ISLES, FL 33160			
Mailing address MAY BE A POST OFFICE I	<u>1027</u>	GUNT 10220,12 00100			
		<del></del>			
B. If amending the registered agent and/o	r registered of	fice address on or	er records, enter t	he name of the new	
registered agent and/or the new registered off			<u> </u>		
Name of New Registered Agent:	ROGER L. TOVAR P.A.				
	2205 SW 12	20 CT			
New Registered Office Address:					
			er Florida street add		
	<del></del>	MIAMI	, Florida	33175	
		City		Zip Code	
New Registered Agent's Signature, if changing R	egistered 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 60% 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

Page 1 of 2

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 1 **Address** Type of Action MGRM NORIEGA, MARIA 2600 S OCEAN DR APT S 303 .□ Add HOLLYWOOD, FL 33019 ∇ Remove MGRM DAHDAH, ANTOINE 18201 COLLINS AVENUE #1406 ✓ Add SUNNY ISLES, FL 33160 Remove Remove Add Remove ∐Add Remove Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) \_\_\_\_, 2012\_\_\_ Dated 0c+. 12 Signature of a member or authorized representative of a member MARIA DEL CARMEN NORIEGA Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00