

L11000104281

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

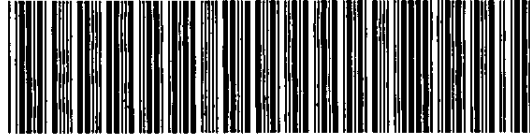
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA
2016 MAR -9 P 2:41
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
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MAR 10 2016

S MASON

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: WTCDG GROUP, 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:

JEFF MEISKIN

Name of Person

WTCDG GROUP, LLC

Firm/Company

4 STARK DRIVE

Address

ROBBINSVILLE, NEW JERSEY 08691

City/State and Zip Code

JMEISKIN@WTCFL.COM

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

For further information concerning this matter, please call:

JEFF MEISKIN

908

907-7788

at ()

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**

WTCDC GROUP, 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 September 15, 2011 and assigned
Florida document number L11000104281.

This amendment is submitted to amend the following:

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

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

Enter new principal offices address, if applicable: _____

(Principal office address MUST BE A STREET ADDRESS) _____

Enter new mailing address, if applicable: _____

(Mailing address MAY BE A POST OFFICE BOX) _____

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: _____

New Registered Office Address: _____

Enter Florida street address

_____, **Florida** _____
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 605, 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

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If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager
AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	BRUNO BOMENY	4800 N. FEDERAL HWY	<input type="checkbox"/> Add
		SUITE 101D	<input checked="" type="checkbox"/> Remove
		BOCA RATON, FL 33431	<input type="checkbox"/> Change
MGR	WORLD TRADE CENTER	4800 N. FEDERAL HWY	<input checked="" type="checkbox"/> Add
	BUSINESS CLUB BRASIL	SUITE 101D	<input type="checkbox"/> Remove
	PARTICIPACOES S/A	BOCA RATON, FL 33431	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Change

2019 MAR 9 PM 2:44
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TALLAHASSEE, FLORIDA
FILED

This image shows a single sheet of white paper with horizontal black ruling lines. The lines are evenly spaced and run across the width of the page. There are approximately 20 lines visible. At the top left corner, there are some faint markings that appear to be the numbers "7" and "1". The rest of the page is blank except for the lines.

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated March 7, 2016

Signature of a member of

Signature of a member or authorized representative of a member

JEFF MEISKIN, MEMBER / AUTHORIZED REPRESENTATIVE

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

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