11/00/17448

(Requestor's Name)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Decument Number)
(Document Number)
Certified Copies Certificates of Status
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TQ: Registration S Division of Co			
PLANWO SUBJECT:	CLUC		
	Name of Lir	nited Liability Company	
The enclosed Articles o	f Amendment and fee(s) are sul	bmitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	JAMES A. MOORE		
		Name of Person	
	PLANWC, LLC		
		Firm/Company	
	7551 CUMBERLAND RO	OAD, #8	
		Address	
	SEMINOLE, FLORIDA	33777	
		City/State and Zip Code	
	JAYMARFLA@AOL.CO		~~~~
		to be used for future annual report notif	
For further information of	concerning this matter, please c	all:	AHA AHA AHA AHA AHA AHA AHA AHA AHA AHA
JAMES A. MOORE		727 4206715	HASSEE I
	of Person	Area Code Daytime	Telephone Numbers 10
Enclosed is a check for t	•		
\$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

PLANWC, 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 10-13-2011 and assigned Florida document number <u>L</u>11000117448 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 "LLC." 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: JAMES A. MOORE Name of New Registered Agent: 7551 CUMBERLAND ROAD, #8 New Registered Office Address: Enter Florida street address **SEMINOLE** Cav

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

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>	Address	Type of Action
MGR	JAMES A. MOORE, TRUSTEE	7551 CUMBERLAND ROAD,	∃ Add
		SEMINOLE, FLORIDA 33777	☐ Remove
			Change
MGR 	MARLENE G MOORE	7551 CUMBERLAND ROAD	
		SEMINOLE, FLORIDA 33777	■ Remove
			☐ Change
			Add
			□ Remove
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record specifies a delayed effe he 90th day after the record is	ective date, but not s filed.	an effective time	e, at 12:01 a.m	. on the earli	ier o
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	ure of a member or author	~/~~	UN		

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Typed or printed name of signee

Filing Fee: \$25.00