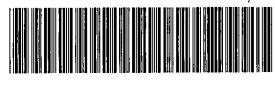


(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					

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B. BOSTICK
FEB - 7 2012
EXAMINER

FILINGS, INC. TERESA ROMA	N.			
(Requestor's Name)				
2805 LITTLE DEAL ROAD				
(Address)				
TALLAHASSEE, FLORIDA 32308	-	OFFICE USE ONLY		
(City, State, Zip)	(Phone #)			
•				
CORPORATION NAME(S	N & DOCUMENT NUM	RED(S) (if Imoun):		
CORTORATION NAME (S	) & DOCOMENT NOM	DER(5) (II KIIOWII).		
1. WDH CAPITAL (Corporation N.	15A, LLC			
(Corporation N	ame)	(Document #)		_
2. (Corporation No		(5)		_
	ime)	(Document #)		
3. (Corporation Na	ame)	(Document #)		_
<b>4.</b>		,		
(Corporation N	ame)	(Document #)		
Walk in Pick up	p time <u>2.06</u>	Certified Copy		
Mail out Will w	vait Photocopy	Certificate of Status		
			12 MILI	
NEW FILINGS	AMENDMENTS			
Profit	Amendment		FEB+6	d d
NonProfit	NonProfit Resignation of R.A., Officer/Director			Timbikan * * ********************************
Limited Liability	Change of Registered Agent			Section 1
Domestication Dissolution/Withdrawal			III): 39	2441
Other		A 9		
<del></del>				
OTHER FILINGS	REGISTRATION/	•		
Annual Report	QUALIFICATION			
Fictitious Name	Foreign			
	Limited Partnership			
Name Reservation	Reinstatement			

Examiner's Initials

Trademark

Other

CR2E031(10/92)

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liabili	ty Company as it now appear	on our records		
(A Florida	ty Company as it now appears Limited Liability Company)	our records.		
he Articles of Organization for this Limited Liability	Company were filed on	/3/12	and assigned	
lorida document number <u>L1200000902</u>	·			
his amendment is submitted to amend the following:				
. If amending name, <u>enter the new name of the lir</u>	nited liability company here	:		
he new name must be distinguishable and end with the w.L.C."	ords "Limited Liability Compar	ny," the designation "LLC	" or the abbreviati	
nter new principal offices address, if applicable:				
Principal office address MUST BE A STREET ADD	ORESS)			
•		<u> </u>	h	
		P.C.		
nter new mailing address, if applicable:			1 1	
Mailing address MAY BE A POST OFFICE BOX)		i		
		-773	an able 197 and	
	<del></del>	SIATE RIDE	<del>u</del>	
. If amending the registered agent and/or regi gistered agent and/or the new registered office ad		ur records, enter the		
Name of New Registered Agent:				
New Registered Office Address:				
	Enter Florida street address			
		, Florida		
	City	Ž	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	<u>Addr</u>	<u>ess</u>	Type of Action
MGRM_ - \	WDM <u>DOM MARK</u>	S <u>U</u> IT	1 BRICKELL AVENUE Ε 900	☐ Add ☑ Remove
_MGRM_	WDM DOM MAKL	<u>SUI</u>	1 BRICKELL AVENUE 7E 900 MI, FLORIDA 33131	Add ☐ Remove
·				Add Kemove
	·	·		Add Remove
	<del></del>			□Add □Remove
	<del></del>			Add Remove
D. If ame	nding any other info	mation, enter change(s) here:	(Attach additional sheets, if necessary.)	
-			ALL AHASSE	12 FF - 6
- 			TILLY S ATE	AH 10 39
Dated	FEBRUARY 6±1	Seraso Roman Signature of a member or authori		<u>~</u>
		ERESA ROMAN Typed or printed	•	

Page 2 of 2

Filing Fee: \$25.00