12000012173

(Requestor's Name)
(requester 5 reality)
(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



800251001008

08/26/13--01027--010 **25.00

2013 AUG 26 PH 3: 53

AUG 27 2013 J. BRYAN

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

WLS Claims Processing LLC			
(<u>Name of the Limited Liabili</u>	ty Company as it now appears on a Limited Liability Company)	our records.)	
The Articles of Organization for this Limited Liability Florida document number L12000012173			
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 end with 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)			
The new name must be distinguishable and end with the w "L.L.C."	ords "Limited Liability Company," t		
Enter new principal offices address, if applicable:		78 - 17 - 17 - 17 - 17 - 17 - 17 - 17 -	
• • •	DRESS)		
		2 2 F	
Enter new mailing address, if applicable:		PH 3:	
(Mailing address MAY BE A POST OFFICE BOX)		경 전 전 전 전 3	
B. If amending the registered agent and/or registered agent and/or the new registered office ad Name of New Registered Agent:		records, enter the name of the new	
New Registered Office Address:	Fntor F	lorida street address	
	Enter 1		
	City	, Florida Zip Code	
	···,	Lip Couc	

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 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>	Address	Type of Action
MGRM	Sylvia Thomson	6363 Highcroft Dr	Add
		Naples FL 34119	Remove
MGR	Sylvia Thomson	6363 Highcroft Dr	✓Add
		Naples FL 34119	Remove
			Add Add Remain
			PH 3: 53 Add Remove
			Add Remove
			Add Remove
			remove

. If amending any other info	ormation, enter change(s) here: (Attach additional sheets, if necessary.)
·	
ated August 23	2013
ated August 25	, <u>Z013</u>
	Signature of a member or authorized representative of a member
Tyler B. Korı	n, Esq.
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

