# L120000140474

(Requ	estor's Name)	
(Addre	ess)	
· (Addre	ess)	
(City/S	State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Busin	ess Entity Nan	ne)
(Доси	ment Number)	
Certified Copies	Certificates	s of Status
Special Instructions to Fili	ing Officer:	

Office Use Only





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JUN - 5 2013 J. BRYAN

#### **COVER LETTER**

TO:

Registration Section
Division of Corporations

SHRIECT.

## WM Investment & Advisory 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:

## Javier Markowicz

Name of Person

WM Investment & Advisory Group, LLC

Firm/Company

2999 NE 191 St Suite 407

Address

Aventura, Florida, 33180

City/State and Zip Code

jmarkowicz@mrkinternationallaw.com

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

For further information concerning this matter, please call:

## Javier Markowicz

ູ 786 **371-129**5

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

WM Investment & Adv	isory Servic	ces, LLC		
(Name of the Limite	d Liability Com A Florida Limite	pany as it now appead Liability Company)	ars oπ our records.)	<u> </u>
	Liability Compa			and assigned
This amendment is submitted to amend the following	lowing:			- <b>4</b>
A. If amending name, enter the new name	of the limited li	ability company he	ere:	
N/A	is submitted to amend the following:  name, enter the new name of the limited liability company here:  st be distinguishable and end with the words "Limited Liability Company," the designation "Lictor the abbreviation ipal offices address, if applicable:  N/A  MAY BE A STREET ADDRESS)  The registered agent and/or registered office address on our records, enter the name of the new and/or the new registered office address here:  N/A  N/A  N/A			
The new name must be distinguishable and end w "L.L.C."	ith the words "Li	imited Liability Comp	pany," the designation "	LLC or the abbreviation
Enter new principal offices address, if appli	cable:	N/A		
(Principal office address MUST BE A STREET ADDRESS)				्रा
			·—	The state of the s
Enter new mailing address, if applicable:		N/A		
(Mailing address MAY BE A POST OFFICE	EBOX)			
				<del>_</del>
B. If amending the registered agent and registered agent and/or the new registered of	or registered Office address h	office address on ere:	our records, enter	the name of the new
Name of New Registered Agent:	N/A			
New Registered Office Address:	N/A			
		E	nter Florida street add	dress
I			. 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 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>	Name	Address	Type of Action
MGR	Weinberg Jonathan	2999 NE 191 St # 407	_ Add
		Aventura, FI 33180	Remove
		N/A	Add
		SOLUTION	Remove
			Remove
<u>_</u>			Add
<del></del>			Add
			Remove Add
			Remove

. If amending any other inform  N/A	nation, enter change(s) here: (Attach additional sheets, if necessar	<b>ツ.)</b>
May 14	2013	
	ignature of a member or authorized representative of a member	
Javier Markowi	cz - Managing Member -	

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

