

L12000041317

(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:

A. LUNT
MAY 21 2011
EXAMINER

Office Use Only



100235182351

05/18/12--01011--025 **25.00

RECEIVED
TALLAHASSEE, FLORIDA

2012 MAY 18 PM 2:51

FILED

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Wisequrlz Investments, 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:

Nicola Brotherton
Name of Person
Wisequrlz Investments LLC
Firm/Company
1214 Meadowbrook Dr.
Address
West Palm Beach, FL 33417
City/State and Zip Code
Smartqurlz@Bellsouth.net
E-mail address: (to be used for future annual report notification)

2012 MAY 18 PM 2:51
CLERK OF STATE
TALLAHASSEE, FLORIDA

FILED

For further information concerning this matter, please call:

Nicola Brotherton at (561) 827-0744
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**

WiseGurlz Investments, 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 3/26/12 and assigned
Florida document number L12000041317.

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)

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:

Nicola Brotherton

New Registered Office Address:

1214 Meadowbrook Dr

Enter Florida street address

West Palm Beach

City

Florida

33417

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

| Title | Name | Address | Type of Action |
|-------|-----------------|---|--|
| MGRM | Mareen Mitchell | 5818 Bermuda cir. W, West Palm Beach, FL 33407 | <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove |
| MGRM | Stacy Garricks | 6571 Osborne Dr. Lake Worth, FL 33462 | <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove |
| MGRM | Zonya Myers | 1214 Meadowbrook Dr. West Palm Beach, FL 33417 | <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Add <input type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Add <input type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Add <input type="checkbox"/> Remove |

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2012 MAY 18 PM 2:51

FILED

Dated May 26, 2012.

Nicola Brotherton
Signature of a member or authorized representative of a member
Nicola Brotherton
Typed or printed name of signee