L12000059495

(Re	equestor's Name)		
(Ad	dress)		
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(Cit	ty/State/Zip/Phone	: #)	
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SECRETARY OF STATE



J. BRYAN

MAY 1 7 2012

EXAMINER

COVER LETTER

TO:	Registration S Division of Co				
SUBJE	CT:	Wharton F	Realty Group, LLC		
		Name of Lim	ited Liability Company		
The encl	losed Articles of	f Amendment and fee(s) are sul	bmitted for filing.		
Please re	eturn all corresp	ondence concerning this matter	r to the following:		
			Adi Gal		
		Wha	arton Realty Group, LLC		
			Firm/Company		
			5650 Stirling Road		1. 23
			Address		图 三 1
Hollywood FI 32021					FILEU 3: 16 2012 MAY 16 PH 3: 16 SECTETARY OF STATE TALLAHASSEE. FLORIDA
			City/State and Zip Code		SSE 6 IT
		adi@	adi@whartonfundingllc.com		京の子と
		E-mail address: (to be used for future annual report notific	ation)	G
For furth	er information of	concerning this matter, please of	call:		意志を
		Adi Gal	_{at (} 305 ₎ 4	09-1305	,
	Name o	of Person	Area Code & Daytime		
Enclosed	d is a check for t	the following amount:			
\$25.0	00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified	e of Status &
	MAIL	ING ADDRESS:	STREET/COURIE	R ADDRESS:	

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE Division of Corporations

May 10, 2012

ADI GAL WHARTON REALTY GROUP, LLC 5650 STIRLING ROAD HOLLYWOOD, FL 32031

SUBJECT: WHARTON REALTY GROUP, LLC

Ref. Number: L12000059495

We have received your document for WHARTON REALTY GROUP, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Joey Bryan Regulatory Specialist II

Letter Number: 112A00013999

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Rea

(A Florida	Limited Liability Company)		
The Articles of Organization for this Limited Liability Florida document numberL12000059495	Company were filed on	05/02/2012	and assigned
	·		
This amendment is submitted to amend the following:			
A. If amending name, <u>enter the new name of the lin</u>	nited liability company here	2:	
The new name must be distinguishable and end with the wo "L.L.C."	ords "Limited Liability Compar	ny," the designation "L	LC" or the abbreviatio
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADD	RESS)	7	SECOND TO SECOND
Enter new mailing address, if applicable:			SSE OF M
(Mailing address MAY BE A POST OFFICE BOX)			To w
			3 3
B. If amending the registered agent and/or registered agent and/or the new registered office add		ur records, <u>enter tl</u>	ne name of the nev
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida street address		
	, 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 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>	<u>Name</u>	Address	Type of Action
MGR	ADI GAL	5650 STIRLING RD #4 HOLLYWOOD FL 33021	Add Remove
MGR	LIRAN HASSIN	5650 STIRLING RD #4 HOLLYWOOD FL 33021	☐ Add ☑ Remove
			Add Remove
			Add Remove
			☐Add ☐Remove
			Add Remove
D. If amend	ling any other information, enter change	(s) here: (Attach additional sheets, if necessary)	16 PM
Dated	MAY 14 , 20°	$\overline{}$	_
	Signature of a member of	or authorized representative of a member ADI GAL	
	Typed o	or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00