

LI2000110586

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

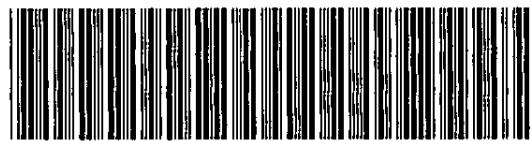
(Business Entity Name)

(Document Number)

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DIVISION OF CORPORATIONS
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OCT 19 2012
T. HAMPTON

COVER LETTER

**TO: Registration Section
Division of Corporations**

WAP PROPERTIES LLC

SUBJECT: _____ 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:

Gregory R. Fishman, Esq.

Name of Person

Gregory R. Fishman, PA

Firm/Company

2750 NE 185 Street, Ste. 302

Address:

Aventura, FL 33180

City/State and Zip Code

greg@grfpa.com

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

For further information concerning this matter, please call:

Gregory Fishman at (305) 792-6945
Name of Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

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
WAP PROPERTIES LLC

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

12 OCT 18 AM 10: 56

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

August 28, 2012

The Articles of Organization for L12000110586 Limited Liability Company were filed on _____ and assigned
Florida document number L12000110586.

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:

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

Address
2750 NE 185 Street, Ste. 302
Aventura, FL 33180

Type of Action

Please remove
listed managing
member.
TY!

Remove

- id**
- Remove**

Remove

A small icon consisting of two overlapping squares, one light blue and one light green, with a small horizontal line extending from the left side.

d
 move



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

Dated ✓October 16, ✓ 2012

Signature of a member or authorized representative of a member

Gregory R. Fishman, Esq.
Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS