113000016461

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
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T. BROWN

COVER LETTER

TO: Registration Section
Division of Corporations

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:

Alan J. Phillips

Name of Person

5947 Early Harvest Court

Firm/Company

Address

Orange Park, Fl. 32003

City/State and Zip Code

alanphillips1@hotmail.com

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

For further information concerning this matter, please call:

Alan J. Phillips

904₅591-7325

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)

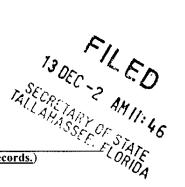
MAILING ADDRESS:

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



WITPAC 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 Liab Florida document number <u>L13000016461</u>	bility Company were filed on 1-31-2013	and assigned
This amendment is submitted to amend the follow	ving:	
A. If amending name, enter the new name of t	he limited liability company here:	ii — — — — — — — — — — — — — — — — — —
The new name must be distinguishable and end with "L.L.C."	the words "Limited Liability Company," the de	signation "LLC" or the abbreviation
Enter new principal offices address, if applicat	ble:	
(Principal office address MUST BE A STREET	ADDRESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE Be	<u>OX)</u>	
B. If amending the registered agent and/or registered agent and/or the new registered office		ds, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida	a 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>	Name		Type of Action
MGMR	Elena M. Perfetti	5947 Early Harvest Cour	t 🗸 Add
		Orange Park, Fl . 32003	Remove
			-
	·		Add
			Remove
· · · · · · · · · · · · · · · · · · ·	·		Add
			Remove
			Add
			Remove
			Add
			Remove
			- Add
			Remove

). If an	nending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
ted _	,
	april
	Signature of a member or authorized representative of a member
	Alan J. Philips
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00