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SECRETARY OF STATE  
TALLAHASSEE, FL 32301

B. BOSTICK  
JUL - 8 2013

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: W CAPITAL PH 20, 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:

Yair Wolff

Name of Person

W CAPITAL PH 20, LLC

Firm/Company

3180 Stirling Road

Address

Hollywood, FL 33021

City/State and Zip Code

WGROUP.ANAT@GMAIL.COM

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

For further information concerning this matter, please call:

Yair Wolff

Name of Person

at ( 954 ) 374-8670

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

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## Page 1 of 3

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

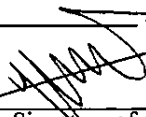
<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	Tamir Lubezky	3180 Stirling Road	<input checked="" type="checkbox"/> Add
		Hollywood, FL 33021	<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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TALLAHASSEE, FLORIDA  
2013 JUL -5  
Add  
Remove  
40

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

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Dated July 2<sup>nd</sup> 2013



Signature of a member or authorized representative of a member

Yair Wolff

Typed or printed name of signee

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Filing Fee: \$25.00

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