

# L13 000026506

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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((H140000114113)))



H140000114113ABCN

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To:

Division of Corporations  
Fax Number : (850)617-6383

From:

Account Name : USACORP INC.  
Account Number : I20130000019  
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14 JAN 15 PM 2:23

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
CAPRI W TIC LLC

Certificate of Status	1
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JAN 16 2014

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Electronic Filing Menu

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Help

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

**CAPRI W TIC 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 2/20/2013 and assigned  
Florida document number L13000026506

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)

FILED  
2014 JAN 15 AM 8:17  
CLERK OF CIRCUIT COURT  
JACKSONVILLE, FLORIDA

**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

City, Florida 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 605, 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

**AMBR = Authorized Member**

2014 Add  
2015 Remove  
2016 Add  
2017 Add

01/15/2014 11:13:19  
(((H14000011411 3)))

From: CAPRI W TI JOSEF STRAUSS

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

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E. Effective date, if other than the date of filing: \_\_\_\_\_ (optional)  
(If an effective date is listed, the date must be specific and cannot be more than 90 days after filing.) (605.0207 (3)(b))

Dated January 14, 2014

/s/ Robert Wolf

\_\_\_\_\_  
Signature of a member or authorized representative of a member

Robert Wolf

\_\_\_\_\_  
Typed or printed name of signee

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Filing Fee: \$25.00

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TALLAHASSEE, FL 32399-0001

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