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OCT - 7 2013

T. BROWN

COVER LETTER

subject: <u>480</u>	5N WICKHA Name of Limited L	MCR LLC iability Company	
The enclosed Articles of Am	endment and fee(s) are submitte	ed for filing.	
Please return all corresponde	ence concerning this matter to the	e following:	
-	CATHY	R LEDERE Name of Person WICK HAMCIP	R_
-	4805 N.	Firm/Company	
	6640 1	-a Pina Ct Address	
	CATHY LEDER	RATON FL 3 ty/State and Zip Code ER 1@ a Mail. C used for future annual report notification	33433 om_
For further information cond	cerning this matter, please call:	<u> </u>	
Cathy Name of Po	R Lederer erson	at (<u>617)</u> <u>413.54</u> Area Code & Daytime Tele	phone Number
Enclosed is a check for the f	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:

TO:

Registration Section Division of Corporations

> 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

73 00	Mary.
13 OCT -4	1777 - 188
our records.)	

The Articles of Organization for this Limited Liability Company were filed on May 3, 2013 and assigned Florida document number <u>L 130000 65539</u>.

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 t "L.L.C."	he words "Limited	d Liability Company	"," the designation	"LLC" or the abbreviation
Enter new principal offices address, if applicab	le:	6640	La Pina	Ct
(Principal office address MUST BE A STREET)	ADDRESS)	Boca (Raton F	334 <u>3</u> 3
Enter new mailing address, if applicable:		6640	LaPine	r Ct
(Mailing address MAY BE A POST OFFICE BO	<u>0X)</u>	_Boca_	RATON 1	<u> </u>
				33433
B. If amending the registered agent and/or registered agent and/or the new registered office		ce address on ou	r records, <u>enter</u>	the name of the new
Name of New Registered Agent:			 	
New Registered Office Address:	664	o La Pi	na Ct	Y 1
		Enter	r Florida street ac	ddress
	BOCA	Katon	, Florida _	33433

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 amending the or Managing I		our records, enter the title, name, and address	
MGR = Mana	ger naging Member	our records: his is a change of addi	7e55
<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	CATHY RLEDERER	22864 MARBEILA CIR	Add
		BOCA RATION 33433	Remove
MGRM	CATUY P EDEDED.	6640 ha Pina Ct	
MOPIL	CAIN FILLDER	•	•
		BOCA RATON FL	Remove
		33433	_
			Add
			Remove
			Add
			Remove
			Add
			Remove
			Add
			Remove

aiii	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
-	
•	
•	
•	
	Oct 1 , 2013.
	Pothy R. Le Rever
	Signature of a member or authorized representative of a member
	CATHY R LENEPER

Page 3 of 3

Filing Fee: \$25.00