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T Street SERVE AND

COVER LETTER

TO: Registration Section
Division of Corporations

W.G. MIAMI, 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:

MR. MENGELGREIN

Name of Person

W.G. MIAMI, LLC.

Firm/Company

3389 SHERIDAN ST. 264

Address

HOLLYWOOD, FL 33021

City/State and Zip Code

WGMIAMI@GMAIL.COM

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

For further information concerning this matter, please call:

A. MENGELGREIN

Name of Person

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

■ \$25.00 Filing Fce

□\$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

Company as it now owners on	our records
Cimited Liability Company)	rui records.
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ds "Limited Liability Company," t	he designation "LLC" or the abbreviation
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ered office address on our re ess here:	ecords, enter the name of the new
Enter Flo	orida street address
	, Florida
City	Zip Code
	ESS) ered office address on our reess here: Enter Flo

New Registered Agent's Signature, if changing Registered Agent:

VALCE BALABAL LLC

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 Title Title **Address Type of Action** Name 3389 SHERIDAN ST. 264 MGR **ASAF MENGELGREIN** HOLLYWOOD, FL 33021 Remove 3389 SHERIDAN ST. 264 MGR **ROI MENGELGREIN** HOLLYWOOD, FL 33021 Remove

. If am	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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	Mu
	Signature of a member or authorized representative of a member ASAF MENGELEREIN
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

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