L13000128179

Division of Corporations

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

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

From:

Amend

Account Name : ACCOUNT BOOKKEEPING CORP
Account Number : I20120000055
Phone : (407)898-1757
Fax Number : (407)897-5336

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: _____

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
WRA REAL ESTATE SOLUTIONS LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	$25.00

RECEIVED
13 SEP 17 AM 6:42
SECRETARY OF STATE
TALLAHASSEE FLORIDA

J. SAULSBERRY
EXAMINER
SEP 18 2013

COVER LETTER H13000206053

TO: **Registration Section**
Division of Corporations

SUBJECT: WRA REAL ESTATE SOLUTIONS 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:

THIAGO DE ATAIDE
Name of Person

WRA REAL ESTATE SOLUTIONS LLC
Firm/Company

6965 PIAZZA GRANDE STE 201-A
Address

ORLANDO, FL 32835
City/State and Zip Code

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

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For further information concerning this matter, please call:

ALBERTO LEMUS at (407) 898-1757
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

H13000206053

H13000206053

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

WRA REAL ESTATE SOLUTIONS 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 09/11/2013 and assigned Florida document number L13000128179.

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."

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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)

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

, **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

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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	Name	Address	Type of Action
MGR	KAREN M COSTA	2349 LAKE DEBRA DR #638 ORLANDO, FL 32835	☐ Add ☑ Remove
MGR	BBG FLORIDA ENTERPRISE LLC	6807 EDGEWORTH DR ORLANDO, FL 32819	☐ Add ☑ Remove
MGR	DEBORA P ATAIDE	1219 ALSTON BAY BLVD APOPKA, FL 32703	☑ Add ☐ Remove
			☐ Add ☐ Remove
			☐ Add ☐ Remove
			☐ Add ☐ Remove

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

Dated September 16, 2013

Signature of a member or authorized representative of a member

THIAGO DE ATAIDE

Typed or printed name of signee

2013 SEP 17 AM 9:32

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To: Page 7 of 7 2013-09-16 21:06:28 (GMT) 14072641UU26 From: GXT Technology Customer