L13000136685

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SECRETARY OF STATE ALLAHASSEE, FLORIDA

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NOV - 5 2013

T. BROWN

COVER LETTER

.aTO:

Registration Section Division of Corporations

SUBJECT:

Wilson Tucker Holdings, 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:

Holly Babij

Name of Person

Wilson Tucker Holdings, LLC

Pirm/Company

304 Porto Vecchio Way

Address

Palm Beach Gardens, FL 33418

City/State and Zip Code

gpbabij@yahoo.com

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

For further information concerning this matter, please call:

Holly Babij

917 923-0745

Name of Person

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$25.00 Filing Fcc

■\$30.00 Filing Fee & Certificate of Status

☐\$55.00 Fifing 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

I3 NOV-4 PM 3: 04

TALLAHASSEE, FLORIDA

Wilson Tucker Holdings, 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 Lia	bility Company were filed on	September 26, 2013	_ and assigned
Florida document number L13000136685	·		
This amendment is submitted to amend the follow	ving;		
A. If amending name, enter the new name of t	he limited liability compan	y here;	
The new name must be distinguishable and end with "L.L.C."	the words "Limited Liability C	ompany," the designation "LLC	or the abbreviation
Enter new principal offices address, if applical	ole:		
(Principal office address MUST BE A STREET	ADDRESS)		
Enter new mailing address, if applicable:			
(Malling address MAY BE A POST OFFICE BO	<u></u>		
			
B. If amending the registered agent and/or registered agent and/or the new registered office	registered office address e address here:	on our records, enter the	name of the new
Name of New Registered Agent:			
New Registered Office Address:	·		
		Enter Florida street address	†
	City	, Florida	7:- Code
	City	4	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

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

Add Remove
Remove
Add
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Remove
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. If amen	ding any other information	on, enter change(s) here:	(Attach additional sheets, if neces	ssary.)
				
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_				
$_{\rm ed}$ Oc	tober 28	2013		
	7. W	RD		
	Signa	ture of a member or authoriz	ed representative of a member	
	Holly Babij			
		Typed or printed i	name of signeo	

Page 3 of 3

Filing Fee: \$25.00