113000/55654

(Re	equestor's Name)	
(Ac	ldress)	
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(Ci	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nar	me)
(Do	ocument Number)	
Certified Copies	_ Certificate:	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



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03/20/17--01024--007 **25.00

CECRETARY OF STATE

S Warren

APR 07 2017



March 24, 2017

BOB YURAN 4500 PGA BLVD., SUITE 202 PALM BEACH GARDENS, FL 33418

SUBJECT: W. DAVID DEITH, LLC Ref. Number: L13000155654

We have received your document for W. DAVID DEITH, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Stacey M Warren Regulatory Specialist II

Letter Number: 017A00005739

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: W. DAVID DELTH 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:
Name of Person
Firm/Company
ASCO PGB BWD
PRG FL 33418 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Person at (56) 249 - 3611 Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\ \text{Certificate of Status}\$\$ Certified Copy (additional copy is enclosed)\$\$ Certified Copy (addi

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

WDWID	DEITL	t LLC.	
(<u>Name of the Limited Liability</u> (A Florida)	y Company as it now appea Limited Liability Company)	ars on our records.)	
The Articles of Organization for this Limited Liability Co. Florida document number <u>L13000155</u>	ompany were filed on 1	12/30/13	and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limit	ted liability company l	<u>iere</u> :	
The new name must be distinguishable and contain the words "Limit	ted Liability Company," the	designation "LLC" or the abb	reviation "L.L.C."
Enter new principal offices address, if applicable:			
Principal office address MUST BE A STREET ADDR	ESS)		
Cuten war mailing address if applicable			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	•		
Mading address MAT BE A POST OFFICE BOA)			
B. If amending the registered agent and/or regist registered agent and/or the new registered office addr Name of New Registered Agent:		on our records, <u>enter t</u>	he name of the new
New Registered Office Address:			
	Enter Fl	orida street address	•
	City	, Florida _	Zip Code
New Registered Agent's Signature, if changing Registered	•		Zip Code
I hereby accept the appointment as registered agent a provisions of all statutes relative to the proper and conaccept the obligations of my position as registered ago being filed to merely reflect a change in the registered company has been notified in writing of this change.	and agree to act in this emplete performance of ent as provided for in	of my duties, and I am fo Chapter 605, F.S. Or, i	miliar with and f this document is
	If Changing Registered A	Agent, Signature of New Reg	
	Page 1 of 3	TOP TO	ED

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR =	Manager	,
AMBR =	Authorized	Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MER	DAVID DEITH	4500 PGABWD	B Add
		4500 PGA FL 33418	Remove
			🗆 Change
		· · · · · · · · · · · · · · · · · · ·	□ Add
			□ Remove
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ective date, if other effective date is listed, the ether inserted ument's effective date record specifies at the 90th day after	the date must be speci d in this block does e on the Departmen a delayed effect	ific and cannot be p s not meet the ap int of State's reco	plicable statutory fil rds, •	more than 90 days ing requirements	s, this date will	not be listed
ed <u>4.3.2</u>				uz VII		ne sectiones
	Signatur	re of member or a	uthorized representati	ve of a member	ETAR HASS	granden

Filing Fee: \$25.00