6715/2018



Division of Corporations Electronic Filing Cover Sheet

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Tc:

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

From:

Account Name	:	REGISTERED AGENTS	INC
Account Number	:	12009000081	
Phone		(307)200-2803	
Fax Number	:	(855)330-1010	

- -----

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

Email Address:___



2018 LLC AMND/RESTATE/CORRECT OR M/MG RESIGN SI NOL WEATHERFORD CAPITAL, LLC 0 Certificate of Status .. Ph 0 Centified Copy 04 ς Page Count . . Estimated Charge \$25.00

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

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Weatherford Capital, LLC (Name of the Limited Liability Compan (A Florida Limited L	y as it now appears on our records	<u>.</u> ,
The Articles of Organization for this Lunited Liability Company of Florida document number L15000006588		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabi	lity company here:	
Weatherford Funds LLC		
The new name must be distinguishable and contain the words "Limited Liabili	ity Company," the designation "LLC	or the appreviation "L.L.C.
Enter new principal offices address, if applicable:		2018
(Principal office address MUST BE A STREET ADDRESS)		
Passa and mailing address if applicable:		
Enter new mailing address, if applicable: <u>(Mailing address MAY BE A POST OFFICE BOX)</u>	· · ·	012: 23 019

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:	Entec Florada sir cet address
	, FloridaZy: 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 605, 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 Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

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MGR = Manager AMBR = Authorized Member

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<u>Title</u>	Name	Address	<u>Type of Action</u>
	· · · · · · · · · · · · · · · · · · ·		🖸 Add
			🖸 Remove
			Change
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

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If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated June 15	2018	
	mature of a member or authorized representative of a member	
Morgan Nob	le	

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Filing Fee: \$25.00