L15 000 014651

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WINDJAMMER ASSOCIATES

LLC

June 2, 2016

Registration Section
Division of Corporations
Post Office Box 6327
Tallahassee, Florida 32314

Dear Madam/Sir:

Pursuant to this letter and the enclosed Articles of Dissolution for a Limited Liability Company and the Articles of Amendment to the Articles of Organization of Richard A. Mathurin And Associates, LLC, I am hereby requesting that you dissolve the limited liability company, Windjammer Associates, LLC (document #L15000195369) and change the name of Richard A. Mathurin And Associates, LLC (document #L15000014651) to Windjammer Associates, LLC. In addition, the new address for the newly named Windjammer Associates, LLC is:

3725 SE Ocean Boulevard, Suite 103 Stuart, FL 34996

I am the managing member of both the dissolving LLC and the newly named LLC so I hereby consent that you make these changes. Also enclosed is a check for \$50 for the dissolution fee (\$25) plus the Amendment fee (\$25).

If you have any questions regarding these matters, please don't hesitate to contact me at 619-278-8308. Thank you for your attention to these matters.

Sincerely,

Richard A. Mathurin, Jr.

Maked A. Matt, Dr.

Managing Member

RAM, Jr./NS Enclosures



June 7, 2016

RICHARD MATHURIN JR 3725 SE OCEAN BLVD SUITE 103 STUART, FL 34996

SUBJECT: RICHARD A. MATHURIN AND ASSOCIATES, LLC

Ref. Number: L15000014651

We have received your document for RICHARD A. MATHURIN AND ASSOCIATES, 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):

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

Please return the corrected original and one copy of 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.

Letter Number: 616A00011951

Justin M Shivers
Regulatory Specialist III
Registration/Qualification Section

www.sunbiz.org

COVER LETTER

Division of Corp	orations		
SUBJECT: RICK	nard A. Mathur Name of Limit	ted Liability Company	<u>Uc</u>
The enclosed Articles of A	amendment and fee(s) are subn	nitted for filing.	
Please return all correspon	dence concerning this matter to	o the following:	
	Richard M. Windiammer	Name of Person Associates Lic	
	3725 SE GC	ran Boulevard Sun Address	
	dick @ Wind E-mail address: (to	City/State and Zip Code 'an Acrassocia fes. c be used for future annual report notificat	CON (ion)
For further information co	ncerning this matter, please ca	II:	
Richard Ma Name of	thurin Tr. Person	at (<u>619</u>) <u>278-9</u> Area Code Daytime Te	P304 Ilephone Number
Enclosed is a check for the	e 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

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**

Richard A. Mathurin (Name of the Limited Liability Compa (A Florida Limited I	And Associates LLC
(Name of the Limited Liability Compa (A Florida Limited I	any as it now appears on our records. Liability Company)
The Articles of Organization for this Limited Liability Company Florida document numberL150000 4C51	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	oility company bere:
Windjammer Associa As LLC The new name must be distinguishable and contain the words "Limited Liabil	
The new name must be distinguishable and contain the words "Limited Liabil	ility Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	3725 SE Ocean Boulevard, Suite 103 Stuart FL 34996
(Principal office address MUST BE A STREET ADDRESS)	Stuart FL 34996
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	3725 SE Ocean Boutward Suik los Stuart, FL 34996
B. If amending the registered agent and/or registered of 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 , Florida Zip Code
N D 1. 14 3.51	

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

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_	
_	
Note: 1	e date, if other than the date of filing:
	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of
The 9	90th day after the record is filed.
The 9	90th day after the record is filed.
The 9	

Page 3 of 3

Filing Fee: \$25.00