

**Florida Department of State**  
 Division of Corporations  
 Electronic Filing Cover Sheet

L15000039057

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

**From:** Account Name : INCORP SERVICES INC  
 Account Number : I20120000007  
 Phone : (702) 866-2500  
 Fax Number : (702) 866-2689

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

**Email Address:** managedreports@incorp.com

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN**  
**LAND TRUST UNITED LLC**

Certificate of Status	0
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Page Count	04
Estimated Charge	\$25.00

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BUREAU OF COMMERCIAL INFORMATION SERVICES

MAR 12 2015  
 J. HARRIS

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**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Land Trust United 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:

JoAnne Stefanov  
Name of Person

Incorp Services, Inc.  
Firm/Company

2360 Corporate Circle Suite 400  
Address

Henderson, NV 89074  
City/State and Zip Code

managedreports@incorp.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JoAnne Stefanov at (702) 866-2500  
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

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ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF

Land Trust United 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 03/03/2015 and assigned Florida document number L15000039057.

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."

Enter new principal offices address, if applicable:  
**(Principal office address MUST BE A STREET ADDRESS)**

14112 Huntington Point Dr., #204  
Delray Beach, FL 33484

Enter new mailing address, if applicable:  
**(Mailing address MAY BE A POST OFFICE BOX)**

14112 Huntington Point Dr., #204  
Delray Beach, FL 33484

**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 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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If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager  
AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
AMBR	Dennis Wenger	204 Huntington Point Delray Beach, FL 33484	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
AMBR	Emma Wenger	204 Huntington Point Delray Beach, FL 33484	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
AMBR	Dennis Wenger	14112 Huntington Point Dr., #204 Delray Beach, FL 33484	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
AMBR	Emma Wenger	14112 Huntington Point Dr., #204 Delray Beach, FL 33484	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

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

Four horizontal lines for amending information.

E. Effective date, if other than the date of filing: \_\_\_\_\_ (optional)  
(If an effective date is listed, the date must be specific and cannot be more than 90 days after filing.) (605.0207 (3)(b))

Dated March 9th, 2015



Signature of a member or authorized representative of a member

Emma Wenger

Typed or printed name of signer

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Filing Fee: \$25.00

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