

L18000 76771

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

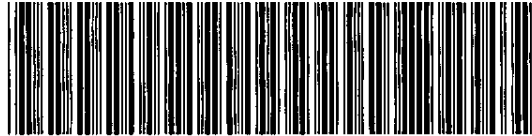
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

BLOOM & FREELING

ATTORNEYS AT LAW

2295 NW CORPORATE BOULEVARD • SUITE 117
BOCA RATON, FLORIDA 33431
TEL: 561-864-0000 • FAX: 561-864-0001
E-MAIL: BFLAW@BLOOM-FREELING.COM

JONATHAN BLOOM**
MICHAEL A. FREELING**

ALSO ADMITTED IN
*NEW YORK
*CONNECTICUT
+WASHINGTON D.C.

May 6, 2015

VIA OVERNIGHT DELIVERY

Florida Department of State
Division of Corporations
Clifton Bldg.
2661 Executive Center Circle
Tallahassee, FL 32301

Re: WEBROI, LLC
Amendment to document L15000076771

Dear Sir or Madam:

Enclosed please find check number 6510, in the amount of \$25.00, which represents an amount due for the enclosed Amendment of Articles of Organization.

This change is to amend principal and mailing address only.

If you have any questions, please feel free to contact me.

Very truly yours



Susan Roy, Paralegal

/sr
Enc.

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: WEBROI, 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:

JONATHAN BLOOM, ESQ.

Name of Person

BLOOM & FREELING

Firm/Company

2295 NW CORPORATE BLVD., SUITE 117

Address

Boca Raton, Florida 33431

City/State and Zip Code

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

For further information concerning this matter, please call:

JONATHAN BLOOM, ESQ.

561
at ()

864-0000

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

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

WEBROI, 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 April 30, 2015 and assigned Florida document number L15000076771.

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 contain 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)

4755 TECHNOLOGY WAY

SUITE 109

BOCA RATON, FL 33431

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

4755 TECHNOLOGY WAY

SUITE 109

BOCA RATON, FL 33431

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

City, Florida

City

15 MAY -7 PM 1:55
SUGGESTION OF STATE
ALL AMENDED FLORIDA
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

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>	<u>Address</u>	<u>Type of Action</u>
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
		_____	<input type="checkbox"/> Change
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
		_____	<input type="checkbox"/> Change
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
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		_____	<input type="checkbox"/> Remove
		_____	<input type="checkbox"/> Change

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

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 prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

(b) The 90th day after the record is filed.

Dated 5/5, 2015.


Signature of a member

Jonathan Blum, Attorney & Authorized
Typed or printed name of signee

Typed or printed name of signee

15 MAY -7 PM 1:55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
m. on the earlier.