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JUN 2 4 2015 S. YOUNG

## COVER LETTER

го:	Registration Sec Division of Corp		* ************************************			
		ET WPB HOLDINGS LLC	٤,			
SUBJE	CT:	Name of Limi	ited Liability Company			
		Amendment and fee(s) are submitted and fee(s)	-			
		George Zweifler				
			Name of Person			
		Atlantic Ave Properties				
			Firm/Company			
		1102 N. Atlantic Dr.		د. ه ر - (	ित्र <b>जै</b> }	
			Address			
		Lantana, FL. 33462		, -	ीत है	FILED
		gz@pbforrent.com	City/State and Zip Code		52 5	
		E-mail address: (1	to be used for future annual report notific	cation)	्ति श	•
For furt	her information co	oncerning this matter, please ca	all:			
George	Zweifler		408 234-4005 at ( )			
	Name of	Person		Telephone Number		
Enclose	ed is a check for th	e following amount:				
	.00 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified C	of Status &	

TO:

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

13TH STREET WPB HOLDINGS		
(Name of the Lim	ited Liability Company as it now appears on ( (A Florida Limited Liability Company)	our records.)
The Articles of Organization for this Limited I	Liability Company were filed on june 11	, 2015 and assigned
Florida document number L15000101784	<u></u> .	
This amendment is submitted to amend the fol	lowing:	•
A. If amending name, enter the new name	of the limited liability company here:	
he new name must be distinguishable and contain the	words "Limited Liability Company," the designation	ation "Ll.C" or the abbreviation "L.L.C."
Enter new principal offices address, if appli		· · · · · · · · · · · · · · · · · · ·
• •		
Principal office address MUST BE A STRE.	<u> </u>	直
		7
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
		13 m 22
3. If amending the registered agent and		records, enter the name of the
egistered agent and/or the new registered of	onice address here:	
Name of New Registered Agent:	Atlantic Ave Properties LLC	
New Registered Office Address:	1102 N. Atlantic Ave	
regione e emise / tadioso.	Enter Florida st	reet address
	Lantana	, Florida 33462
	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

# 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

Title	<u>Name</u>	Address	Type of Action
*			□ Add
			□ Remove
		-	☐ Change
			□ Add
			☐ Remove
			Change
			Remove
			Change
			□ FAdd □ □ Remove
			☐ Change
			Add
			Remove
			☐ Change
		****	Add
			☐ Remove
			☐ Change

acquiring and Manageing p	roperties. The capital account is made up of funds co	ontributed by G Zweifler and a
Note from Michael Hilghm	an for half	
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ctive date, if other than tl	as data of filing:	(optional)
effective date is listed, the date m	oust be specific and cannot be prior to date of filing or more block does not meet the applicable statutory filing re	than 90 days after filing.) Pursuant to 605.
	Department of State's records.	quirements, this date will not be liste
		Fig. 3
ecord specifies a delay e 90th day after the re	ed effective date, but not an effective time ecord is filed.	e, at 12:01 a.m. on the earlie
5 5 5 6 7 6 7 6 7 6 7 6 7 6 7 6 7 6 7 6		
June 17, d	2015	
<i>a</i> 1		97. <b>5</b>
	Signature of a member or authorized representative of a	्री हा

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Filing Fee: \$25.00