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HARRIE

COVER LETTER

Division of Corporations						
SUBJECT: WAF FLOR. OA PLOPARTES 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:						
Richard A. Murdout Name of Person MURDOUL WARES & WALMAN PLLC Firm/Company 14 S.E. 4th STOURT, SUITE 36 Address Address City/State and Zip Code RMURDOUH @ MUNUFIAL. COM E-mail address: (to be used for future annual report notification)						
For further information concerning this matter, please call:						
Russian An Murbout at (561) 347-8780 Name of Person Area Code Daytime Telephone Number						
Enclosed is a check for the following amount: 25.00 Filing Fee \$\text{Certificate of Status}\$ \$\text{Certified Copy} \text{(additional copy is enclosed)}\$ \$\text{Certified Copy} \text{(additional copy is enclosed)}\$						

Registration Section .

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

WAF FLORIDA KI	aparies LLC
(<u>Name of the Limited Liability</u> (A Florida L	Company as it now appears on our records.) imited Liability Company)
The Articles of Organization for this Limited Liability Cor Florida document number <u>(1500)4375</u>	mpany were filed on BIZIIZOIS and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limite	ed liability company here:
The new name must be distinguishable and contain the words "Limite	ed Liability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	ZOI SOUTH NARCISSUS AUF
(Principal office address MUST BE A STREET ADDRE	WEST PALMERALA, & 33401
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered agent and/or the new registered office addre	red office address on our records, <u>enter the name of the new</u> ss 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 Agen

Page 1 of 3

CHORLOS IN CONTROLL

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 = A	uthorized Member	
<u>Title</u> MGQ	Name WILLIAM A. FOUND	201 South NARCUSSUS Aug Add
		# 1502 PRemove
mal	VIUKI B. LOOK	WESTPALM BRALL & SSAOT SCHAnge 201 SOUTH NARCUSSUS AUS Add
		WBT PACM BHACK & 38401 Change
		Change Add
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		M			
	Signa	ture of a member or authoriz	A. Murdoch	a member	E8 13
		Typed or printed n	ame of signee		3
		Page 3	of 3		<u>හ</u> ර

Filing Fee: \$25.00