Division of Corporations Electronic Filing Cover Sheet

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(((H190001348713)))



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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : ACCOUNT BOOKKEEPING CORP

Account Number : I20120000055 Phone : (407)898-1757

Fax Number : (407)898-1737

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

Email Address: INFO Q ABK CORP.COM

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN WCJ INVESTMENTS LLC

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Corporate Filing Menu

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3 04/24/2019 03:32 PM, TO:18506176383 FROM:5612934213

COVER LETTER

	Registration Se Division of Cor			
cum ir		STMENTS LLC		
SUBJEC	v1:	Name of Lim	ited Liability Company	
The enc!	osed Articles of	Amendment and fec(s) are sub-	mitted for filing.	
Please re	eturn all correspo	ndence concerning this matter	to the following:	
		JULIA TEDESCO		
		ACCOUNT BOOKKEEPI	Name of Person NG CORP	
		5301 CONROY ROAD SU	Firm/Company JTTE 140	
		ORLANDO, FL 32811	Address	
		INFO@ABKCORP.COM	City/State and Zip Code	· :
For furth	ner information c	E-mail address: (oncerning this matter, please of	to be used for future annual report notifi all:	cation)
JULIA I	redesco		407 898-1757 at ()	
	Name o	f Person	Area Code Daytime	Telephone Number
Enclosed	is a check for th	ne following amount:		
■ \$25.	00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Stutus	□ \$55,00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Registr Divisio P.O. B	ING ADDRESS: ation Section on of Corporations ox 6327 assee, EL 32314	STREET/COURIE Registration Section Division of Corpora Clifton Building 2661.Executive.Cer	1
		,	Tallahassee, FL 323	

Page:

WCJ INVESTMENTS LLC

4 04/24/2019 03:32 PM , TO:18506176383 EROM:5612934213 ARTICLES OF AMENDMENT

ARTICLES OF ORGANIZATION **OF**

(Name of the Um	ted Liability Compa (A Florida Limited I	by as it now appears on our rec ability Company)	erli.)	
The Articles of Organization for this Limited I Florida document number L15000156544	.iability Company	were filed on 09/14/2015	and assigned	
This amendment is submitted to amend the following	lowing:			
A. If amending name, enter the new name of	f the limited linh	ility company here:		
The now name must be distinguishable and contain the	words "Limited Liabil	ity Company," the designation "I	LC' or the abbreviation 'L.L.C."	
Enter new principal offices address, if applic	:able:	-		
(Principal office address MUST BE A STREE	T ADDRESS)			
			, ~2	
Enter new mulling address, if applicable:			. \	
(Mailing address MAY BE A POST OFFICE	BOX)		——————————————————————————————————————	
	•			
B. If amending the registered agent and registered agent and/or the new registered of Name of New Registered Agent:	Mcc address here	SIRA FIGUEIREDO	() (c)	
New Registered Office Address:	13538 VILLAGE PARK DR.STE. 265			
1100		Enter Florida street ada		
	ORLANDO		Florida 32837 Zip Code	
		City	Zip Code	
New Registered Agent's Signature, if changing				
I hereby accept the appointment as registere provisions of all statutes relative to the prop accept the obligations of my position as registering filed to merely reflect a change in the company has been notified in writing of this	er and complete stered agent as p registered office change. If Clibb	performance of my duties, rovided for in Chapter 60 address, I hereby confirm The Registered Agent, Signature	and I am familiar with and 5, F.S. Or, if this document is that the limited liability	
	Page 1	or h		

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Page:	5	04/24/2013	03.32 271.119	46661,620	19.04. John 15.10

MGR = Manager

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

AMBK - A	Authorized Member		
<u>Title</u>	Name	Address	Type of Action
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			□ Remove
			Change
			Add
			Remove
			☐ Change
			□ Add >-
			□ Remove →
			Change
			Add
			□ Remove
			□ Change
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Page 2 of 3

D. If an	pending any other inf	formation, enter ch	TO: 1859617 ange(s) here: (Attach	additional sheets	, if necessary.)	
						
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E. Effe	ctive date, if other the	an the date of filling	earnot be prior to date of fil	ing or more than 90 d	_ (optional) kys after filiog.) Pursum	t to 605.0207 (3)(b)
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docu	ment's effective date on	the Department of Si	tale's records.			
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