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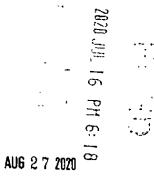
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S. YOUNG

COVER LETTER

TO:

Registration Section **Division of Corporations**

Tallahassee, FL 32314

WPB Gen	eral, LLC		
SUBJECT:			
	Name of Lim	ited Liability Company	· · · · · · · · · · · · · · · · · · ·
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Evan L. Mimun, Esq.		
	is an is william usq.		
		Name of Person	
	Melys Holdings, LLC		
		Firm/Company	
	1144 N. Ocean Blvd.	rarm/Company	
	1144 N. Ocean Biva.		
	 	Address	
	Palm Beach, FL 33480		
		20 and 170 and 1	
	evan.mimun@gmail.com	City/State and Zip Code	
	-	to be used for future annual report no	titication)
		·	,
	oncerning this matter, please c		
Evan L. Mimun		561 309-1163	
Name c	of Person	at () Area Code Daytii	me Telephone Number
Enclosed is a check for the	he following amount:		
■ \$25.00 Filing Fee		☐ \$55.00 Filing Fee &	
	Certificate of Status	Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy
			(additional copy is enclosed)
Mailing Addres		Street Address:	
Registration 1		Registration S	
Division of C	•	Division of Co The Centre of	•
P.O. Box 632	. 1	The Centre of	r arranassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

WPB General, LLC			
(Name of the Limit	ed Liability Compa (A Florida Limited l	ny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited L Florida document number	ability Company	were filed on October 28, 2015	and assigned
This amendment is submitted to amend the following:			18
A. If amending name, <u>enter the new name o</u> ResiGroup, LLC	the limited liab	ility company here:	
The new name must be distinguishable and contain the w	ords "Limited Liabi	lity Company," the designation "LLC" or	the abbreviation "L.L.C."
Enter new principal offices address, if applic	able:		
(Principal office address MUST BE A STREET ADDRESS)		N/A	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	<i>BOX</i>)	N/A	
B. If amending the registered agent and/or r		address on our records, enter the	name of the new registere
agent and/or the new registered office addres	ss here:		
Name of New Registered Agent:	N/A		
New Registered Office Address:	N/A		
		Enter Florida street address	
		, Florid	
		Сиу	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>	Address	Type of Action
····	N/A		□Add
			□Remove
			□Change
	N/A		□Add
			□Remove
			□Change
	N/A		□Add
			□Remove
			□Change
	N/A		
			□Remove
	No		□Change
	N/A 		□Add
			□Remove
	N/A		□Change
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(if an effi Note:	ve date, if other than the date of filing: (optional) ective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuam to 605.0207 (3 lf the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the ent's effective date on the Department of State's records.
e record ord is fil	d specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the ed.
Dated ₋	July 14. 2020.
	Signature of a member or authorized representative of a member
	Evan L. Mimun, Esq., RA Typed or Frinted name of signee