L16000034579

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SECRETARY OF STATE FALLARIAS SPE, FLORID.

WAR O Z 2016 J. HARRIS

COVER LETTER

TO:		istration Se ision of Cor			
CHIDI	ECT:	WWMRG S	Statutory Agent, LLC		
3003	ECI		Name of Lim	ited Liability Company	
The e	nclosed	l Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please	e return	all correspo	ndence concerning this matter	to the following:	
			Anne W. Paul		
				Name of Person	
	Woods, Weiddenmiller, Michetti, Rudnick & Galbraith, L.P.				
		Firm/Company			
9045 Strada Stell Court, Suite 400		uite 400			
			Address		
			Naples, FL 34109		
		City/State and Zip Code		·	
			apaul@WWMRGlaw.com		
				to be used for future annual report notifi	cation)
For fu	ırther ir	nformation co	oncerning this matter, please ca	all:	
Brad	A. Gal	braith		239 325-5581 at ()	
		Name o	f Person	Area Code Daytime	Telephone Number
Enclo	sed is a	a check for th	ne following amount:		
□ \$2	25.00 F	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:

TO:

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

WWMRG Statutory Agent, LLC		
(Name of the Limited 1 (A	Liability Company as it now appears on ou Florida Limited Liability Company)	r records.)
The Articles of Organization for this Limited Liabi Florida document number <u>L16000034579</u>	ility Company were filed on $\frac{02/18/201}{}$.	and assigned
This amendment is submitted to amend the following	ing:	
A. If amending name, enter the new name of th	e limited liability company here:	
The new name must be distinguishable and contain the word	s "Limited Liability Company," the designation	ion "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicabl	le:	
(Principal office address MUST BE A STREET A	ADDRESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO) 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 offic		17 RIDA
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida stre	eet 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 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
MGR	Gregory N. Woods	9045 Strada Stell Court, Suite 400	■ Add
•		Naples, FL 34109	□ Remove
-			Change
MGR	Casey K. Weidenmiller	9045 Strada Stell Court, Suite 400	Add
		Naples, FL 34109	Remove
			☐ Change
MGR	Michael L. Michetti, Jr.	9045 Strada Stell Court, Suite 400	Add
		Naples, FL 34109	Remove
			☐ Change
MGR	Joshua D. Rudnick	9045 Strada Stell Court, Suite 400	Add
		Naples, FL 34109	☐ Remove
			□ Change
			Add
			Remove Remove Change Change Change Change Remove
			Change

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Note: If the date inserted in this block document's effective date on the Department.	e specific and cannot be prior to date of filing or more than 90 dk does not meet the applicable statutory filing requirement artment of State's records. Effective date, but not an effective time, at 1	ents, this date will not be listed a
February 25,	2016	
Bla.	Millet	SEC TALL
Si	gnature of a member or authorized representative of a member	80
Brad A. Galbraith		S. 29
	Typed or printed name of signee	THE IT
		STA C
	Page 3 of 3	57 7

Filing Fee: \$25.00