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COVER LETTER

TO:	Registration Se Division of Cor		High control (A)	
··. SUBJE		atman and Associates L.L.C.	•	
30 BJE		Name of Limi	ited Liability Company	-
		Amendment and fee(s) are sub-	-	
		Judreca Wilson-Chatman		
			Name of Person	
		Wilson-Chatman and Asso	ciates L.L.C.	
			Firm/Company	
		9526 Argyle Forest Blvd, I	B2, #415	节一
	•		Address	
		Jacksonville, Florida, 3222	22	18 SEP 16 PH 4: 25
		WCAMCC2016@gmail.com	City/State and Zip Code	25
			to be used for future annual report notifi	cation)
For furt	her information c	oncerning this matter, please co	all:	
Leonard	d Chatman Sr.		904 434-0493 at ()	
	Name o	f Person		Telephone Number
Enclose	d is a check for tl	he following amount:		
□ \$25	.00 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)
			CHARLETTCOLLA	ED ADDRESS

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

Wilson-Chatman and Associates L.L.C.		
(Name of the Limited Liabili (A Florid	ity Company as it now appears on our records.) a Limited Liability Company)	
The Articles of Organization for this Limited Liability C	Company were filed on June 15, 2016	and assigned
This amendment is submitted to amend the following:	_	
A. If amending name, enter the new name of the lim	ited liability company here:	
The new name must be distinguishable and contain the words "Lin	nited Liability Company," the designation "LLC" or	the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADD)	RESS)	00 CO
Enter new mailing address, if applicable:		16 TARKET
(Mailing address MAY BE A POST OFFICE BOX)		PH 770
		<u> </u>
B. If amending the registered agent and/or registered agent and/or the new registered office add		nter the name of the new
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
		•
	, Floric	1a 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	Judreca Wilson-Chatman	9526 Argyle Forest Blvd, B2, #415	■ Add
		Jacksonville, FL 32222	☐ Remove
		14.4.4.4.4	☐ Change
			Add
			☐ Remove
			Change ST
		•	SE Add S Remove
		•	□ Remove
			Add
			Remove
			Change
			Add
			☐ Remove
			☐ Change
			□ Add
			Remove
			□ Change

Judreca Wilson-Chatman is being add	led as the MGR of the L.L	.C.	•	
				
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he record specifies a delayed effection	ve date, but not an e	ffective time, at	12:01 a.m. on the	earlier of:
The 90th day after the record is fil	led.			
Dated September 14	, 2016.			
() Chal				•
		presentative of a memb		

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Typed or printed name of signee

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