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SECRETARY OF STATE
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N. HARRIE

COVER LETTER

10:		sion of Corp)
WORLD MANUFACTURING LLC SUBJECT:					
30130	LCT.		Name of Lim	ited Liability Company	
The e	nclosed	Articles of A	Amendment and fee(s) are sub-	mitted for filing.	
Please	e return	all correspor	ndence concerning this matter	to the following:	
			KENNETH DAMON		
				Name of Person	
			· WORLD MANUFACTUR	RING LLC	
				Firm/Company	
			17103 SE 110TH CT RD		
				Address	
			SUMMERFIELD FL 3449	1	
				City/State and Zip Code	
			SLAG0289@YAHOO.COM		The second secon
		_		to be used for future annual rep	oort notification)
For fu	ırther in	formation co	oncerning this matter, please ca	all:	
KEN	NETH I	DAMON		843 751 9 at ()	
		Name of	Person	Area Code	Daytime Telephone Number
Enclo	sed is a	check for the	e following amount:		
■ \$2	25.00 Fi	ling Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclose	Certificate of Status & Certified Copy (additional copy is enclosed)

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

WORLD MANUFACTURING LI		
(Name of the Limi	ted Liability Company as it now appea (A Florida Limited Liability Company)	irs on our records.)
The Articles of Organization for this Limited I Florida document number L16000125037	Liability Company were filed on $\frac{0}{2}$	and assigned
Γhis amendment is submitted to amend the fol	lowing:	
A. If amending name, enter the new name of	of the limited liability company h	ere:
The new name must be distinguishable and contain the	words "Limited Liability Company," the	designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if appli	cable:	
Principal office address MUST BE A STRE	ET ADDRESS)	S T
		CSET 28
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE	<u>BOX)</u>	07 = 7
		<u> </u>
B. If amending the registered agent and registered agent and/or the new registered of		n our records, enter the name of the nev
Name of New Registered Agent:	SHERRE LYNN ROHRBAUGH	I .
New Registered Office Address:	17103 SE 110TH COURT RD	
	Enter Flo	orida street address
	SUMMERFIELD	, Florida ³⁴⁴⁹¹
	City	Zip Code

New Registered Agent's Signature, if changing Registered Agent:

WORLD MANIER ACTURING LLC

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
AMBR	SHERRE LYNN ROHRBAUGH	17103 SE 110TH CT RD SUMME	■ Add
			□ Remove
			☐ Change
			□ Add
			☐ Remove
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Filing Fee: \$25.00