L16000126420

. (Re	questor's Name)	
(Ad	dress)	
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(Cit	ty/State/Zip/Phone	: #)
PICK-UP	☐ WAIT	MAIL
(Ви	isiness Entity Nam	ne)
(Do	ocument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	





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WE 10 SOLD

727 W 11th St - Corporate OFFice

Panami (1+ 1 7 2 3240)
City/State and Zip Code

Jee Christopher John Gomus Long E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Name of Person

at (7/0) _

870-6481 Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$25.00 Filing Fee

TO:

Registration Section
Division of Corporations

□ \$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:

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

WNT- Hillview +	errace AD+S LLC
(Name of the Limited Liability Company (A Florida Limited Lia	y as it now appears on our records.) ability Company)
The Articles of Organization for this Limited Liability Company we Florida document number 11000126420	716 111
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability	ity company here:
The new name must be distinguishable and contain the words "Limited Liability	y Company," the designation "LLC" or the abbreviation "L.1.C."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address here:	
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	City ZimCode
New Registered Agent's Signature, if changing Registered Agent:	हिंहें ए 🛄
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete p accept the obligations of my position as registered agent as pr being filed to merely reflect a change in the registered office a company has been notified in writing of this change.	erformance of my duties, and I am familiar with and ovided for in Chapter 605, F.S. Or, if this document is

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 Title Name Address Type of Action Chien topher les 48 Baaden Hun Place Amherit, NJ 14226 ARemove ☐ Change ROBertRuth 11 Elthan Dr □ Add Am herst, N+14226 _⊠ Remove ☐ Change 8700 Front Beach Rd UNT+10101 Parama City Beach FL 32407 andest harrow MGC **⊠**,Remove ☐ Change Solement WN+HOldINGSLLC 727W11th St Parlamacity, EL 3240 - Remove Change Remo hange □ Add ☐ Remove ☐ Change

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icclife date, il vellei than the date of imme.		than 90 days after	filing.) P		
an effective date is listed, the date must be specific and cannot be prior to	le statutory filing re	quirements, thi	s date wi	II not be	listed :
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Filing Fee: \$25.00