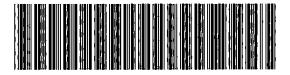
## L16000/42271

| (Requestor's Name)                      |
|---|
| (Address)                               |
| (Address)                               |
| (City/State/Zip/Phone #)                |
| PICK-UP WAIT MAIL                       |
| (Business Entity Name)                  |
| (Document Number)                       |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
|   |
|   |
| •                                       |

Office Use Only



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OITAPR 27 AM TO: 28
SECRETARY OF STATE

K. SALY MAY -1 2017

## **COVER LETTER**

| TO:                               | Registration Se<br>Division of Cor |  | *4,  |  |  |  |  |  |
|-----------------------------------|------------------------------------|--|--|--|--|--|--|--|
| SURIF                             |                                    | i Wilder, LLC                                |  |  |  |  |  |  |
| Name of Limited Liability Company |                                    |  |  |  |  |  |  |  |
|                                   |                                    | Amendment and fec(s) are sub                 |  |  |  |  |  |  |
|                                   |                                    | Steven T. Wilder                             | •  |  |  |  |  |  |
|                                   |                                    |  | Name of Person   |  |  |  |  |  |
|                                   |                                    | Watson and Wilder, LLC                       |  |  |  |  |  |  |
|                                   |                                    |  | Firm/Company   |  |  |  |  |  |
|                                   |                                    | 2260 Wednesday Street, S                     | uite 200   |  |  |  |  |  |
|                                   |                                    |  |  |  |  |  |  |  |
|                                   |                                    | Tallahassee, FL 32308                        |  |  |  |  |  |  |
|                                   |                                    | City/State and Zip Code Toddwilder@aol.com   |  |  |  |  |  |  |
|                                   |                                    | E-mail address: (                            | to be used for future annual report notif                        | ication)   |  |  |  |  |
| For furt                          | her information c                  | oncerning this matter, please ca             | all:   |  |  |  |  |  |
| Steven                            | Steven Wilder 850 254-0677         |  |  |  |  |  |  |  |
|                                   | Name o                             | f Person                                     | Area Code Daytime  | Telephone Number   |  |  |  |  |
| Enclose                           | d is a check for th                | ne following amount:                         |  |  |  |  |  |  |
| \$25                              | .00 Filing Fee                     | □ \$30.00 Filing Fee & Certificate of Status | S55.00 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

FILED 2017 APR 27 AM DE 21

| Watson and Wilder, LLC  |  |   | SECRETADO AM 10: 28                   |
|---|--|---|---------------------------------------|
| ( <u>Name of the Limit</u>  | ed Liability Compa<br>(A Florida Limited | <b>ny as it now appears on ou</b><br>Liability Company) | r records AHASSEE, FLOOR              |
| (Name of the Limited Liability Company as it now appears on our records AHASSEE, FLORIDA (A Florida Limited Liability Company)  the Articles of Organization for this Limited Liability Company were filed on7/29/16 and assigned lorida document numberL16000142271 this amendment is submitted to amend the following:  If amending name, enter the new name of the limited liability company here:  the new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."  Inter new principal offices address, if applicable:  2   |  |   |                                       |
| Florida document numberL16000142271   | ·  |   |                                       |
| (Name of the Limited Liability Company as It now appears on our records AHASSEE, FLORIDA  The Articles of Organization for this Limited Liability Company were filed on 7/29/16 and assigned  Florida document number 116000142271 and assigned  Florida document number |  |   |                                       |
| A. If amending name, enter the new name of  | the limited liab                         | ility company here:                                     |                                       |
| The new name must be distinguishable and contain the w  | ords "Limited Liabi                      | lity Company," the designation                          | on "LLC" or the abbreviation "L.L.C." |
| Enter new principal offices address, if applic  | able:                                    | 3300 S Dixie Hwy, Sui                                   | te 136                                |
| • •   |  | West Palm Beach, FL3                                    | 33405                                 |
| •   |  |   | . 106                                 |
| Enter new mailing address, if applicable:   |  |   |                                       |
| (Mailing address MAY BE A POST OFFICE BOX)  |  | West Palm Beach, FL 3                                   | 13405                                 |
|   |  |   | records, enter the name of the new    |
| Name of New Registered Agent:   | <del></del>                              |   |                                       |
| New Registered Office Address:  | 2260 Wednesda                            | <u> </u>  |                                       |
|   |  | Enter Florida stree                                     | et address                            |
|   | Tallahassee                              |   |                                       |
|   |  | 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: FILED MGR = Manager AMBR = Authorized Member 2817 APR 27 AM 10: 29 **Address Type of Action** Title Name SECRETARY OF STATE TALLAHASSEE, FLORIDA \_□ Add \_□ Remove ☐ Change ☐ Add \_□ Remove \_ Change □ Add ☐ Remove Change □ Add □ Remove ☐ Change \_□ Add □ Remove ☐ Change □ Add ☐ Remove

\_□ Change

| Effective date, if other than the date of filing:  If an effective date, if other than the date of filing:  If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 Note:  If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as document's effective date on the Department of State's records.  The poth day after the record is filed.  Dated April 18  2017  Signature of a member or authorized representative of a member |   | TILET  | )                  |
|---|---|--|--------------------|
| Effective date, if other than the date of filing:  (optional)  If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207  Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as document's effective date on the Department of State's records.  The poth day after the record is filed.  Dated April 18  , 2017  April 18  , 2017  | <del></del>   | 2017.APR 27 AN -   | _                  |
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| Al Jul  | Onted April 18  | 2017   |                    |
| Signature of a member or authorized representative of a member  | ) / l   | <u></u>  |                    |
| Signature of a member or authorized representative of a member .  | THE   | 1.00   |                    |
|   |   | Signature of a member or authorized representative of a member   |                    |

Page 3 of 3

Filing Fee: \$25.00