Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

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COVER LETTER

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SUBJEC	.1:	,	Name of Lim	ited Liability Company		
The enclo	osed A	rticles of A	mendment and fee(s) are sub	mitted for filing.		
Please ret	turn al	l correspond	dence concerning this matter	to the following:		
			WILLIAM S. WEISMAN			
				Name of Person		
					·	
				Firm/Company		.g.
			140 N. FEDERAL HIGHV			
				Address		
			BOCA RATON, FL 33432	2.		
				City/State and Zip Code		
			wweisman@wbsmlawyers.	com to be used for future annual report noti		
For furthe	er info	rmation con	cerning this matter, please co	•	ncanonj	
WILLIA	M S. V	VEISMAN		561 241-6336		
		Name of P	erson	Area Code Daytim	e Telephone Number	
Enclosed	is a ch	eck for the	following amount:			
\$25.0	0 Filin	ng 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: 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 WOW OTHER LICE

2.

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Comms (A Florida Limited	any as it now appears on our records.)			
(A Florida Limited	Liability Company)	•		
The Articles of Organization for this Limited Liability Company Florida document number <u>L16000181236</u>	were filed on 9/28/16	and assigned		
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liab	pility company here:			
WSW QUICK STP LLC				
The new name must be distinguishable and contain the words "Limited Liab	ility Company," the designation "LLC" or the a	abbreviation "L.L.C."		
Enter new principal offices address, if applicable:	590 MADISON AVE., 21ST FLOOR			
(Principal office address MUST BE A STREET ADDRESS)	NEW YORK, NEW YORK 10022	A S		
		C 6		
Enter new mailing address, if applicable:	590 MADISON AVE., 218T FLOOR	CT 27 CT 27 ETAR HASS		
(Mailing address MAY BE A POST OFFICE BOX)	NEW YORK, NEW YORK 10022			
B. If amending the registered agent and/or registered or registered agent and/or the new registered office address here.	office address on our records, <u>enter</u>	S Z		
Name of New Registered Agent:	·			
New Registered Office Address:	Enter Florida street 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

Title	<u>Name</u>	Address	Type of Action	
MGR	DAVID EDELSTEIN	590 MADISON AVE., 21ST FLOC	₩ Add	
	·	NEW YORK, NEW YORK 10022	☐ Remove	
		**************************************	□ Change	
for after a character property and groups are			□ Add	
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<u>ote:</u> If the date inser	or than the date of filing: the date must be specific and cannot be prior to date of filited in this block does not meet the applicable statutorate on the Department of State's records.	(optional) ing or more than 90 days after filing.) Pursuant to 605.02 ry filing requirements, this date will not be listed a
record specifies The 90th day aft	a delayed effective date, but not an effec er the record is filed.	ctive time, at 12:01 a.m. on the earlier
ned 10 26 17.		
	Signature of a member or authorized represe	entative of a member

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Filing Fee: \$25.00