

L17000001684

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

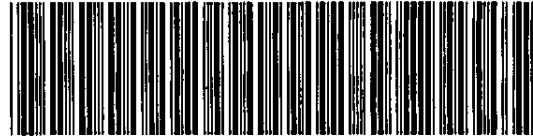
(Business Entity Name)

(Document Number)

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JAN 26 P 4:31  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

S Warren

JAN 27 2017

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Heil & Wilshire Associates LLC  
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Christopher Heil  
Name of Person

Heil & Wilshire Associates LLC.  
Firm/Company

800 moree loop #9  
Address

winter springs FL 32708  
City/State and Zip Code

chris.Heil300@gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Christopher Heil at (407) 844-5574  
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- |  |  |  |  |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(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

Heil & Wilshire Associates LLC  
(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on Jan 3rd 2017 and assigned  
Florida document number ~~L160000186165~~ L17000001684

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

Wilshire Investments LLC / Wilshire Capital LLC

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 applicable:

(Principal office address **MUST BE A STREET ADDRESS**)

Enter new mailing address, if applicable:

(Mailing address **MAY BE A POST OFFICE BOX**)

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TALLAHASSEE, FLORIDA

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

Charles Wilshire

New Registered Office Address:

80 moree loop #9  
Enter Florida street address

winter springs, Florida 32708  
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

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
AMBR	Christopher Heil	80 moree loop #9	<input type="checkbox"/> Add
		winter springs FL 32708	<input checked="" type="checkbox"/> Remove
		80 moree loop #9	<input type="checkbox"/> Change
AMBR	Charles Wilshire	winter springs FL 32708	<input checked="" type="checkbox"/> Add
		80 moree loop #9	<input checked="" type="checkbox"/> Remove
		winter springs FL, 32708	<input type="checkbox"/> Change
MGR	Christopher Heil	80 moree loop #9	<input type="checkbox"/> Add
		winter springs FL 32708	<input checked="" type="checkbox"/> Remove
		80 moree loop #9	<input type="checkbox"/> Change
MGR	Charles Wilshire	winter springs FL 32708	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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TALLAHASSEE, FLORIDA

[illegible]

(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 (3)(b)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

Dated Jan 23<sup>rd</sup>, 2017

Signature of a member or authorized representative of a member

Christopher Heil  
Typed or printed name of signer

SECRETARY OF STATE  
TAMPA, FLORIDA

FD-302 (Rev. 11-27-70)