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COVER LETTER

	egistration Sectivision of Corp			
		FINACER, LLC		
SUBJECT	:	Name of Limi	ited Liability Company	
The enclos	ed Articles of A	mendment and fee(s) are sub	mitted for filing.	
Please retu	rn all correspon	dence concerning this matter t	to the following:	
		NORBERTO LOPEZ		
			Name of Person	
		WOLF THE FINANCER,	LLC	
			Firm/Company	
		3501 COLLONADE DRIV	VE	
			Address	
		WELLINGTON, FL 3344	9	
			City/State and Zip Code	
		E-mail address: (1	to be used for future annual report notific	cation)
For further	information co	ncerning this matter, please ca	ill:	
NORBER	TO LOPEZ		at (<u>786</u>) <u>286</u> 8 Area Code Daytime	357
	Name of	Person	Area Code Daytime	Telephone Number
Enclosed i	s a check for the	following amount:		
\$25.00	Filing 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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	WOLF THE FINANCER, I	LLC	
(Name of the Lim	ited Liability Company as it now ap (A Florida Limited Liability Compar	pears on our records.) 1y)	
The Articles of Organization for this Limited I	iability Company were filed on	03/22/2017 and	J assigned
This amendment is submitted to amend the fol	lowing:		
A. If amending name, enter the new name of	of the limited liability company	<u>v here</u> :	
The new name must be distinguishable and contain the	words "Limited Liability Company," t	he designation "LLC" or the abbreviation	n "L.L.C."
Enter new principal offices address, if appli	cable:		
Principal office address MUST BE A STRE	ET ADDRESS)		36.01 18 JL
			<u> </u>
			2 PER
Enter new mailing address, if applicable:			0 0 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7
Mailing address MAY BE A POST OFFICE	<u></u>		
			9 25 5
			- 5 - 6 - 6
B. If amending the registered agent and registered agent and/or the new registered of		on our records, enter the na	me of the new
Name of New Registered Agent:	NORBERTO LOPEZ		
New Registered Office Address:	3501 COLLONADE DR		
	Enter	Florida street address	
	WELLINGTON	, Florida <u>33449</u>	
	City	Zip C	ode

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 = M $AMBR = A$	anager uthorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			□ Remove
			☐ Change
			□ Remove
			_□ Change
			Remove
			☐ Change
			☐ Remove
			Change
			□ Add
			□ Remove
			□ Change
			Add
			□ Remove
			☐ Chanve

ARTICLE IV: THE NAME (F THE AMBR SHALL BE CORRECTED TO READ.	AS FOLLOW:
(AMBR) NORBERTO LOF	EZ WITH A PRINCIPAL ADDRESS OF 3501 COLI	LONADE DR.
WELLINGTON, FL 33449		
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<u> </u>		18 JUN
		——————————————————————————————————————
		D 72
		<u> </u>
		2.
		
ctive date, if other than the	JUNE 12 2018	_ (optional)
e: If the date inserted in this blo	be specific and cannot be prior to date of filing or more than 90 date does not meet the applicable statutory filing requireme	ays after filing.) Pursuant to 605, nts, this date will not be liste
ument's effective date on the De	partment of State's records.	
ecord specifies a delayed	effective date, but not an effective time, at 12	2:01 a.m. on the earlie
ne 90th day after the reco	rd is filed.	
JUNE 12	2018	
\sim \sim \sim \sim \sim		
1/2/2	to Can	

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Filing Fee: \$25.00