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## **COVER LETTER**

	gistration Section vision of Corpor							
SUBJECT:	$\omega$ 0i	RDL 50	LUTIONS	LLC				
		Na	me of Limited Liabilit	ty Company				
The enclosed	l Articles of Ame	endment and feet	s) are submitted for	filing				
			is matter to the follo					
		τΛc	ónica F	ercz				
	-	- 10		ie of Person				
	_	<u> </u>	oeii co P	200				
	-	2901	Riomar	S+	unit :	203		
	_	Fort	Lauder	dalc and Zip Code	333	304		
		monik E-mail	_		COM .	tion)		
For further in	formation concer	rning this matter.						
Mo	Name of Pers	Perch	at (	954,_	3983	5284	<del></del>	
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Enclosed is a	check for the fol	lowing amount:						()
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Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

WARDL SOLUTIONS LIC

(Name of the Limi		•	
('varie or the Dimi	(A Florida Limited	Liability Company)	
The Articles of Organization for this Limited L	iability Company 1 <u>3656</u> 3	y were filed on 06/22/2017 and assigned	
This amendment is submitted to amend the foll	owing:		
A. If amending name, enter the new name o	f the limited liab	bility company here:	
N.A			
The new name must be distinguishable and contain the v	vords "Limited Liabi	ility Company," the designation "LLC" or the abbreviation "L.L.C."	
Enter new principal offices address, if applic	:able:	2901 Riomar St Unit 203	
(Principal office address MUST BE A STREE	<u>(T ADDRESS)</u>	Fort Lauderdale, FL 33304	
Enter new mailing address, if applicable:		N.A	
Mailing address MAY BE A POST OFFICE	BOX)		
B. If amending the registered agent and/or ragent and/or the new registered office addre	ss here:	address on our records, enter the name of the new register	<u>ed</u>
Name of New Registered Agent:	N.A		(
New Registered Office Address:	2901 R	Riomar 6t Unit 203  Enter Florida street address	
	ForT la	oderdale Florida 33304 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.

N.A

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>	Name	Address	Type of Action
AMBR	Mónica Pérez	2901 Riomar St unit 203 For Tlauderdale FL 3330	<u>}</u> ∡Add
		For Tlauderdale FL 3330	)4 □Remove
			🗆 Add
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n effectiv	re 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 605.0, the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed
cument	's effective date on the Department of State's records.
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	ecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
is filed.	$\overline{m}$ .
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Filing Fee: \$25.00