Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.

Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.
Account Number : I200900000081
Phone : (307)200-2803
Fax Number : (855)330-1010

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. 5

Email Address:

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN WILLSTRONG LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$25.00

T. CLINE
JAN 23 2019
EXAMINER

Electronic Filing Menu

Corporate Filing Menu

Help

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Willstrong LLC		
(Name of the Limited I (A)	Jability Company as it now appears on our records.) Florida Limited Liability Company)	
The Articles of Organization for this Limited Liabi	lity Company were filed on 07/12/2017	and assigned
This amendment is submitted to amend the following	ng:	
A. If amending name, <u>enter the new name of th</u>	e limited liability company here:	
The new name must be distinguishable and contain the word Enter new principal offices address, if applicable (Principal office address MUST BE A STREET)	e:	he abbreviation "L.L.C."
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	2X)	2019
		
B. If amending the registered agent and/or registered agent and/or the new registered offic	registered office address on our records, <u>en</u> <u>e address here</u> :	nter the name of the nev
Name of New Registered Agent:		9: 10
New Registered Office Address:	Enter Florida street address	
	, Florid:	11
	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, <u>enter the title</u>, <u>name</u>, <u>and address of each person_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
AMBR	Jason Willoughby	354 Toney Penna Drive	Ø Add
		Suite 1	☐ Remove
		Jupiter, FL 33458	☐ Change
AMBR	Bryan Willoughby	354 Toney Penna Drive	☑ Add
		Suite 1	
		Jupiter, FL 33458	□ Change
AMBR	WILLOUGHBY CONSTUCTION LLC	354 Toney Penna Drive	D Add 22
		Suite 1	∑ Remove
		Jupiter, FL 33458	Change [
			Add
			Remove
			☐ Change
			Add
			☐ Change
		□ Remove	
			Change

Effective date, if other than the date of filing: (option of the prior to date of filing or more than 90 days after date instead in this block does not meet the applicable statutory filing requirements, this bocument's effective date on the Department of State's records. The goth day after the record is filed. Dated January 21			<u>-</u> -
In effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this locument's effective date on the Department of State's records. e record specifies a delayed effective date, but not an effective time, at 12:01 at The 90th day after the record is filled.			_
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January 21 2019	i.m. on t	the ear	lier o
Ribert Tab			
Signature of a member of authorized representative of a member			

Page 3 of 3

Filing Fee: \$25.00