

L17000161570

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

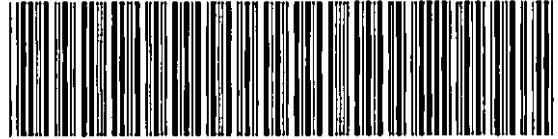
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

18 AUG 23 PM 3:14

FILED

*Amend  
med*

BL. VORISEK

AUG 28 2018

*Rec'd.  
8/23/18*



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

August 13, 2018

JOHN E. EGUSQUIZA  
9960 SW 40TH ST  
MIAMI, FL 33165

SUBJECT: WDBC PROPERTY, LLC  
Ref. Number: L17000161570

The enclosed document and check in the amount of \$50 is returned to you unprocessed, as it has been in pending awaiting a new check for the proper amount of the amendment filing fee or confirmation to continue forward with the filing and enclosed check.

Should you wish to file the enclosed application, please return it along with the proper filing fee of \$25.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Michelle Milligan  
Senior Section Administrator

Letter Number: 118A00016650

69

RECEIVED

2018 AUG 23 AM 9:28



EGUSQUIZA LAW  
9960 SW 40<sup>th</sup> Street  
Miami, Florida 33165  
305-223-8744  
john@jeelawpa.com

August 17, 2018

Florida Department of State  
Division of Corporations  
PO BOX: 6327  
Tallahassee, Florida 32314

Subject: WDBC Property, LLC  
Ref Number: L17000161570

Dear Sir/ Madam:

Enclosed please find UCC Financial Statement Form to be recorded, enclosed also find our firm check number 10379 in the amount of \$25.00 to Florida Department of State.

If you have any questions concerning this matter please contact us at (305)223-8744

Sincerely,

John E. Egusquiza

John E. Egusquiza

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** WDBC PROPERTY, 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:

Jaime D Juliao

\_\_\_\_\_  
Name of Person

\_\_\_\_\_  
Firm/Company

9960 BIRD ROAD

\_\_\_\_\_  
Address

MIAMI, FL 33165

\_\_\_\_\_  
City/State and Zip Code

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jaime D Juliao

\_\_\_\_\_  
Name of Person

at (\_\_\_\_\_) \_\_\_\_\_

Area Code

Daytime Telephone Number

Enclosed is 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**

WDBC PROPERTY, 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 07/28/2017

Florida document number L17000161570

This amendment is submitted to amend the following:

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

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)

**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:

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

FILED  
18 AUG 23 PM 3:14  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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>
MGR	JULIAO, JAIME D	9960 BIRD ROAD	<input type="checkbox"/> Add
		MIAMI, FL 33165	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

[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 3, May 2018



Signature of a member or authorized representative of a member

James D. Smith

Typed or printed name of signee