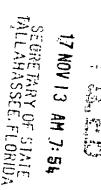


(Re	questor's Name)
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PICK-UP	WAIT MAIL
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(Dc	ocument Number)
	_ Certificates of Status
Special Instructions to	Filing Officer:
2017 NGV 13 KM (\$: 20	Office Use Only



11/14/17--01027--021 **25.00



ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

WISE TAX PRO CENTERS, 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 $\frac{11/6/2017}{2}$ and assigned Florida document number L17000229153 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

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.

New Registered Agent's Signature, if changing Registered Agent:

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>Address</u> **Type of Action** Title **Name** 1598 SW 17TH STREET, BOCA Raton MARSHALL WISE MGR **■** Add FL 33486 □ Remove ☐ Change MGR HUBERT MCINTOSH _□ Add 1598 SW 17TH STREET, BOCA F ■ Remove ☐ Change _ 🗆 Add ☐ Remove ☐ Change _□ Add _□ Remove ☐ Change _□ Add □ Remove _□ Change □ Add ☐ Remove

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Effective date, if other than the date of filing: If an effective date is listed, the date must be specific and cannot Note: If the date inserted in this block does not meet the	be prior to date of filing or r applicable statutory filin	(optional) more than 90 days after filing.) Pursua ng requirements, this date will no	nt to 605,02 t be listed :
document's effective date on the Department of State's	ecords.		
he record specifies a delayed effective date, The 90th day after the record is filed.	out not an effective	time, at 12:01 a.m. on the	earlier
Dated NOVERMBER 7TH 201	· · · · · · · · · · · · · · · · · · ·		
1 1 0.2	7-1		

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00