

lote: 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.

(((H23000125930 3)))



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 : EXPRESS CORPORATE FILING SERVICE INC.

Account Number : I20000000146 Phone : (305)444-4994 Fax Number : (305)328-4774

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

Email Address:____

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN WFPAO HOLDINGS LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

Electronic Filing Menu Corporate Filing Menu

Help

T. LEMIEUX APR - 5 2023 To:

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

OF

WFPAO HOLDINGS LLC	
(Name of the Limited Liability Compa- (A Florida Limited L	ny as it now appears on our records.) iability Company)
The Articles of Organization for this Limited Liability Company Florida document number L18000003986	were filed on 01/04/2018 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabi	lity company here:
The new name must be distinguishable and contain the words "Limited Liability and Contain the Words" and Contain the words "Limited Liability and Contain the Words" and Contain the Words and Contain th	ity 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:	
(Muiling address MAY BE A POST OFFICE BOX)	€2. ~
	1 23
	77
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	ddress on our records, enter the name of the new registere
	7. T. C.
Name of New Registered Agent:	
	25 Alb
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 provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my duties, and I am familiar with and rovided for in Chapter 605, F.S. Or, if this document is

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>Title</u>	<u>Name</u>	Address	Type of Action	
AMBR	CAEV LAUDERDALE, LLC	3469 W. BOYNTON BEACH BLVD STE 9	□Add	
		BOYNTON BEACH, FL 33436	■Remove	
			Change	
			□Add	
·			□Remove	
			□Change	
			CAdd	
			Пяеточе	
			□Change	
			DAdd	
			Remove	
			□Change	
			□Add	
		*****	□ Remove	
			🗀 Add	
			□Remove	
			□Change	

Tο.

Note:	tive date, if other than the date of filing:	.0207 (3)(b) ed as the
f the reco ecord is f	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after iled.	· the
Dated	l,,	
	// -	
	Signature of a member or authorized representative of a member	