## 118000091867

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## **COVER LETTER**

	gistration Sec vision of Corp				
SUBJECT	Webmacher	s, LLC			
SUBJECT	•	Name of Lim	ited Liability Company		
The enclose	d Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please retur	n all correspo	ndence concerning this matter	to the following:		
		Robert Schnurmacher			
			Name of Person		
		Webmachers, LLC			
Firm/Company				•	
		11577 Ponywalk Trail			
Address					
		Boynton Beach, FL 33473			
			City/State and Zip Code		
		equivox1@gmail.com		<b>-</b>	
For further	information ce	ncerning this matter, please co	to be used for future annual report notif all:	ication)	
Robert Sch	nurmacher		954 292-0797 at ()		
	Name of	Person	Area Code Daytime	: Telephone Number	
Enclosed is	a check for th	e following amount:			
□ <b>\$</b> 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**

Webmachers, LLC		
( <u>Name of the Limited Liability (</u> (A Florida Li	Company as it now appears on our records.) imited Liability Company)	
The Articles of Organization for this Limited Liability Con	npany were filed on April 11, 2018 an	d assigned
Florida document number L18000091867	•	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	d liability company here:	
The new name must be distinguishable and contain the words "Limited	d Liability Company," the designation "LLC" or the abbreviation	on "L.L.C."
Enter new principal offices address, if applicable:		= -11
(Principal office address MUST BE A STREET ADDRES		30 PM
Enter new mailing address, if applicable:		<i>5</i> :
Mailing address MAY BE A POST OFFICE BOX	हिता र	32
B. If amending the registered agent and/or register registered agent and/or the new registered office addres		ame of the
Name of New Registered Agent:		
Name of New Registered Agent:  New Registered Office Address:	Entre Clarity and Alexander	
-	Enter Florida street address	

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, 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>	Type of Action
MGR	Robert Schnurmacher	11577 Ponywalk Trail	<b>■</b> Add
		Boynton Beach, FL 33473	Remove
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fective date, if other than th	e date of filing:		(opti	onal)
n effective date is listed, the date mo te: If the date inserted in this b cument's effective date on the I	st be specific and cannot be lock does not meet the a	ipplicable statutory f	r more than 90 days after	filling.) Pursuant to 605.020
record specifies a delaye The 90th day after the re	d effective date, but ord is filed.	it not an effectiv	e time, at 12:01 a	a.m. on the earlier o
April 27	2018			
neu	·	·		
ated April 27 Whay	there			

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Filing Fee: \$25.00