L18000134772

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TO:		istration Sec ision of Corp		1	
en n te	CT.	WAR NETV	VORK ;;C		
SUBJE	,C1:		Name of Limi	ited Liability Company	
The end	closed	l Articles of A	Amendment and fee(s) are sub-	mitted for filing.	
Please	return	all correspon	ndence concerning this matter	to the following:	
			RICHARD WASERSTEIN	1	
				Name of Person	
			1124 KANE CONCOURS	Firm/Company E	<u> </u>
			BAY HARBOR ISLANDS	Address BAY HARBOR ISLANDS, FL 33154	
			CLAUDIA@CLOSINGS.C	City/State and Zip Code	
			E-mail address: (to be used for future annual report notif	ication)
For fur	ther ii	iformation co	oncerning this matter, please co	all:	
RICHARD WASERSTEIN		305 8618000 at ()			
		Name of	Person	Area Code Daytime	Telephone Number
Enclose	ed is a	i check for th	e following amount:		
È \$2:	5.00 F	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

WAR NETWORK LLC

(Name of the Limited Liability Company as it now appears on our records.)

(A Florida Limited I	Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number L18000134772	were filed on 05/30/2018	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	9. Be D
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "LLC" or the a	bbreviation "L.LCC."
Enter new principal offices address, if applicable:	137 SE 1 AVE	
(Principal office address MUST BE A STREET ADDRESS)	HALLANDALE BEACH, FL 33009	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her		<u></u>
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 agr 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 provided for in Chapter 605, F.S. Or	familiar with and ; if this document is

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 Type of Action **Address** Title Name _D Add _□ Remove __ 🗆 Add ☐ Remove □ Add _□ Remove _ Change □ Add □ Remove _ Change _□ Add □ Remove _□ Change _□ Remove

_ Change

	
Note:	tive date, if other than the date of filing:
the re) The	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of a 90th day after the record is filed.
Dated	AUGUST 2. 2019

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Typed or printed name of signee

Filing Fee: \$25.00