

L180000230399

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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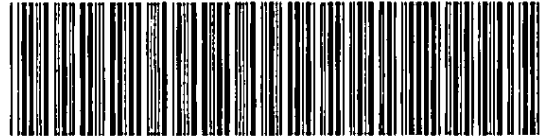
(Business Entity Name)

(Document Number)

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200396320112

10 OCT 27 2022 10:08 AM

LLC Amend

2022 OCT 27 AM 9:08

FILED

A. RAMSEY

JAN 26 2023

Mr. Wey's assistant gave  
permission to write  
out name of LLC in  
Paragraph A since the name

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** Wey Engineering, PLLC  
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:

Matthew G. Wey, PE

Name of Person

Wey Engineering, PLLC

Firm/Company

2002 N. Lois Avenue, Suite 130

Address

Tampa, FL 33607

City/State and Zip Code

mwey@weyeng.com

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

For further information concerning this matter, please call:

Matthew G. Wey, PE

813

353-1227

at ( )

Name of Person

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 Address:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

Wey Engineering, PLLC

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

(A Florida Limited Liability Company)

FILED  
2022 OCT 27 AM 9:08

The Articles of Organization for this Limited Liability Company were filed on 09/28/2018 and assigned Florida document number L18000230399.

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)**

2002 N. Lois Avenue

Suite 130

Tampa, FL 33607

**Enter new mailing address, if applicable:**

**(Mailing address MAY BE A POST OFFICE BOX)**

2002 N. Lois Avenue

Suite 130

Tampa, FL 33607

**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**

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>
P	Matthew G. Wey, PE	2002 N. Lois Avenue	<input type="checkbox"/> Add
		Suite 130	<input type="checkbox"/> Remove
		Tampa, FL 33607	<input checked="" type="checkbox"/> Change
VP	David B. Hubbard, PE	2002 N. Lois Avenue	<input checked="" type="checkbox"/> Add
		Suite 130	<input type="checkbox"/> Remove
		Tampa, FL 33607	<input type="checkbox"/> Change
AVP	Elizabeth M. Fernandez, PE	2002 N. Lois Avenue	<input checked="" type="checkbox"/> Add
		Suite 130	<input type="checkbox"/> Remove
		Tampa, FL 33607	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

**D. If amending any other information, enter change(s) here:** *(Attach additional sheets, if necessary.)*

Principal Address: 2002 N. Lois Avenue, Suite 130, Tampa, FL 33607

Mailing Address: 2002 N. Lois Avenue, Suite 130, Tampa, FL 33607

Registered Agent Name & Address: Matthew G. Wey, PE, 2002 N. Lois Avenue, Suite 130, Tampa, FL 33607

Authorized Person(s) Detail: Title P, Matthew G Wey, PE, 2002 N. Lois Avenue, Suite 130, Tampa, FL 33607

Title VP, David B. Hubbard, PE, 2002 N. Lois Avenue, Suite 130, Tampa, FL 33607

Title AVP, Elizabeth Fernandez, PE, 2002 N. Lois Avenue, Suite 130, Tampa, FL 33607

**E. Effective date, if other than the date of filing:** \_\_\_\_\_ **(optional)**

(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)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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 October 24, 2022

Matthew Wey  
Signature of a member or authorized representative of a member

Matthew G. Wey, PE

\_\_\_\_\_  
Typed or printed name of signer