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# **COVER LETTER**

Division of Cor	porations		
Anaheim - SUBJECT:	Werden LLC		
<u></u>	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Nathan Green		
	<del></del>	Name of Person	<del></del>
		Firm/Company	<del></del>
	1404 North Ronald Reagar	n Blvd, Suite 1120	
		Address	
	Longwood/Florida 32750		
		City/State and Zip Code	
	ngreen@greensaccounting.c		
	E-mail address: (t	to be used for future annual report notifi	cation)
For further information c	oncerning this matter, please ca	all:	
Nathan Green		321 363-4982 at ()	
Name o	f Person	Area Code Daytime	Telephone Number
Enclosed is a check for the	ne 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:

TO:

**Registration Section** 

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

Anaheim - Werden LLC

2018/1:25 AM 8:05 (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 \_\_02/07/2019 and assigned Florida document number 1.19000039276 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: Anaheim - Werden PLLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "L.L.C." 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

### 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 = M $AMBR = A$	lanager authorized Member		
<u>Title</u>	Name	Address	Type of Action
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			Remove
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import - export	whole-sale & retail (internet market sales or brick & mortar settings) of premium
textile products	including but not limited to personalhaberdashery, notions, millinery, textile
novelties & hos	iery in Continental US market.
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n effective date is liste <u>fe:</u> If the date inser	der than the date of filing:
	s a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: ter the record is filed.
February 26	. 2019
	111/1.1/4/20

Page 3 of 3

Filing Fee: \$25.00