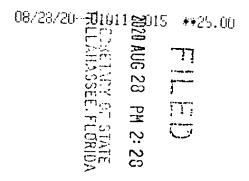
## L19000219653

(Re	questor's Name)	
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## COVER LETTER

	egistration So ivision of Cor			
eun irea	WODRAS	KA ENTERPRISES LLC	•	•
SUBJECT	· :	Name of Lin	nited Liability Company	
The enclos	ed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please retu	rn all correspo	ondence concerning this matter	to the following:	
		ROBERT P. WODRASK	A	
			Name of Person	
		<del></del>	Firm/Company	202 TÃ
		4213 JAN COOLEY DRI		2020 AUG 28 TALL AHASSI
		PANAMA CITY BEACH	Address	28 T
		TANAMA CITT DEACH	City/State and Zip Code	PH 2: 28
		RPGONSULTANTA OL	RWodraska@gm	
For further	information c	oncerning this matter, please o	•	nicatony
ROBERT	P. WODRASI	<b>ά</b> Α	850 814-0145	
_	Name o	f Person	Area Code Daytin	ne Telephone Number
Enclosed is	s a check for th	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)
	ailing Addres egistration S		<u>Street Address:</u> Registration Se	ction
Division of Corporations		Division of Corporations		
	O. Box 632 allahassee, I		The Centre of T 2415 N. Monro	Fallahassee e Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

WODRASKA ENTERPRISES LLC		
( <u>Name of the Limited Liability C</u> (A Florida Lin	ompany as it now appears on our record- nited Liability Company)	<u>r)</u>
The Articles of Organization for this Limited Liability Com Florida document number L19000219653	pany were filed on AUGUST 28, 201	9 and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	liability company here:	
WODRASKA INDUSTRIES LLC		
he 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:		
<u> Principal office address MUST BE A STREET ADDRES.</u>	<u> </u>	2
		020
		ALL BOTT
Inter new mailing address, if applicable:		28 I
Mailing address MAY BE A POST OFFICE BOX)		190 to 1::
running dadress mai ind at the office bond		
	<del></del>	<u> </u>
3. If amending the registered agent and/or registered off	fice address on our records, enter t	75°
gent and/or the new registered office address here:	ince address on our records, enter t	ne name of the new regist
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	Fla	rida
	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>	Address	Type of Action
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ctive date, if other than the effective date is listed, the date mus	st be specific and cannot be prior to date	of filing or more than 90 o	(optional) days after tiling.)	Pursuant to 605.02
e: If the date inserted in this bit intent's effective date on the D	lock does not meet the applicable s repartment of State's records.	fatutory filing requirem	ents, this date	will not be listed:
ord specifies a delayed effectiv filed.	e date, but not an effective time, at	1 12:01 a.m. on the earli	erof: (b) The	90th day after th
d AUGUST 17	2020			
111				
Al ald .				