

L21000447876

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

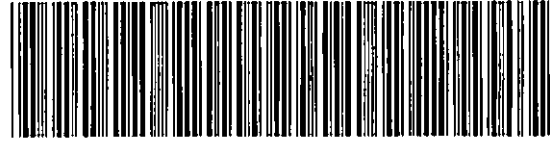
(Business Entity Name)

(Document Number)

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SECRET  
FALL 2021

2021 OCT 25 AM 11:12

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C. BRUMBLE

NOV - 4 2021

TO: **Registration Section  
Division of Corporations**

SUBJECT: GRANBY WB LLC

\_\_\_\_\_  
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:

STEVE WOLF

\_\_\_\_\_  
Name of Person

WOLFCAP MANAGEMENT LLC

\_\_\_\_\_  
Firm/Company

230 ROYAL PALM WAY SUITE 410

\_\_\_\_\_  
Address

PALM BEACH, FL 33480

\_\_\_\_\_  
City/State and Zip Code

SWOLF@WESTCAPRE.COM

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

For further information concerning this matter, please call:

JOSEPH BERNSTEIN

at ( 917 ) 365-3651

\_\_\_\_\_  
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

**AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

GRANBY WB LLC

(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 OCTOBER 13, 2021 and assigned Florida document number 1.21000447876.

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)**

Enter new mailing address, if applicable:

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

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2021 OCT 25 AM 11:12  
SECRETARY OF STATE  
TALLAHASSEE, FL

**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**

MGR = Manager  
AMBR = Authorized Member

| <u>Title</u> | <u>Name</u>            | <u>Address</u>               | <u>Type of Action</u>                      |
|--------------|------------------------|------------------------------|--|
| MGR          | WOLFCAP MANAGEMENT LLC | 230 ROYAL PALM WAY SUITE 410 | <input checked="" type="checkbox"/> Add    |
|              |                        | PALM BEACH, FL 33480         | <input type="checkbox"/> Remove            |
|              |                        |                              | <input type="checkbox"/> Change            |
| MGR          | CAP MANAGEMENT LLC     | 230 ROYAL PALM WAY SUITE 410 | <input type="checkbox"/> Add               |
|              |                        | PALM BEACH, FL 33480         | <input checked="" type="checkbox"/> Remove |
|              |                        |                              | <input type="checkbox"/> Change            |
|              |                        |                              | <input type="checkbox"/> Add               |
|              |                        |                              | <input type="checkbox"/> Remove            |
|              |                        |                              | <input type="checkbox"/> Change            |
|              |                        |                              | <input type="checkbox"/> Add               |
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|              |                        |                              | <input type="checkbox"/> Remove            |
|              |                        |                              | <input type="checkbox"/> Change            |

