

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet
L22000165488

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H22000254608 3))



H220002546083ABC3

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:
Division of Corporations
Fax Number : (850)617-6383

From:
Account Name : ACCOUNT BOOKKEEPING CORP
Account Number : I20120000055
Phone : (407)898-1757
Fax Number : (407)897-5336

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: CUSTOMER@ABK CORP.COM

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
WISSENCLUB LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2022 JUL 27 PM 1:24

APPROVED
AND
FILED

2022 JUL 27 PM 1:24

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: WISSENCLUB 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:

VANESSA ZINICOLA
Name of Person
ACCOUNT BOOKKEEPING CORP
Firm/Company
5301 CONROY ROAD STE 140
Address
ORLANDO, FL 32811
City/State and Zip Code
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

VANESSA ZINICOLA at (407) 898-1757
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

WISSENCLUB 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 04/06/2022 and assigned Florida document number L22000165488.

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: 5301 CONROY ROAD
SUITE 140
(Principal office address MUST BE A STREET ADDRESS) ORLANDO, FL 32811

Enter new mailing address, if applicable: 5301 CONROY ROAD
SUITE 140
(Mailing address MAY BE A POST OFFICE BOX) ORLANDO, FL 32811

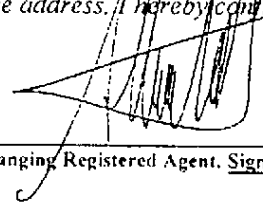
B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent: ALBERTO J CUIDET
New Registered Office Address: 5301 CONROY ROAD SUITE 140
Enter Florida street address
ORLANDO, Florida 32811
City Zip Code

2022 JUL 27 PM 1:24
SECRETARY OF STATE
MAILING ASSISTANT
FILED
APPROVED AND FILED

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

(H220002546083)

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>
AMBR	ALBERTO J CUIDET	5301 CONROY ROAD	<input type="checkbox"/> Add
		SUITE 140	<input type="checkbox"/> Remove
		ORLANDO, FL 32811	<input checked="" type="checkbox"/> Change
AMBR	SILVIA MICHELETTI	5301 CONROY ROAD	<input type="checkbox"/> Add
		SUITE 140	<input type="checkbox"/> Remove
		ORLANDO, FL 32811	<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

(H220002546083)

