

L22000247127

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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

((H22000388047.3))



H22000388047.3

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 : US COMTACOR INC
Account Number : 12020000022
Phone : (770)928-2700
Fax Number : (850)772-8108

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

Email Address: _____

LLC AMEND/RESTATE/CORRECT OR M/MG RESIGN
WD DEVELOPMENT LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

Electronic Filing Menu Corporate Filing Menu Help

FILED

2022 NOV 14 PM 2:39

2022 NOV 14 PM 2:22

NOV 1 2022

H22000388047 3
ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

WD DEVELOPMENT 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 05/27/2022 and assigned
 Florida document number L22000247127.

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:

5520 LAKESIDE DR APT 103

(Principal office address **MUST BE A STREET ADDRESS**)

MARGATE, FL 33063

Enter new mailing address, if applicable:

5520 LAKESIDE DR APT 103

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

MARGATE, FL 33063

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:

WOLF, STEGMANN D

New Registered Office Address:

5520 LAKESIDE DR APT 103

Enter Florida street address

MARGATE

Florida 33063

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

H22000388047 3

H22000388047 3

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>
MGR	STEGMANN, WOLF D	5520 LAKESIDE DR APT 103	<input checked="" type="checkbox"/> Add
		MARGATE, FL 33063	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	STEGMANN, WOLF D	126 W. 14TH STREET	<input type="checkbox"/> Add
		HALEAH, FL 33010	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<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

2022 NOV 14 PM 2:39

FILED

H22000388047 3

H22000388047 3