h22000295437

(Řeq	uestor's Name)	
(Ädd	ress)	
	. <u>.</u>	
(Add	ress)	
(City)	/State/Zip/Phon	
PICK-UP	☐ WAIT	MAIL
(Busi	iness Entity Nar	me)
(Doc	ument Number)	· · · · · · · · · · · · · · · · · · ·
Certified Copies	Certificates	s of Status
Special Instructions to F	iling Officer:	
i		

Office Use Only

5B



700391810307

08/01.22--01018--024 **28.00

SECRETARY OF STATE
SALLATIAN OF STATE

COVER LETTER

TO: Registration Se Division of Cor		•		•,	
SUBJECT:	WGiJ Proper	ATCS LLC ited Liability Company			
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please return all correspo	ndence concerning this matter	to the following:			
	Richard	Caront Name of Person			
		Firm/Company			
	8821 Bus	iness Park Dr	- #4 <u>Co</u>		
	Ft Myers, Grantinst E-mail address:	City/State and Zip Code South Code City State and Zip Code	ication)	SECRETAR TALLAS	
For further information c	oncerning this matter, please c	all:		(A)	
Rich Giran	<u>n+</u> f Person	at (<u>239</u>) <u>398 –</u> Area Code Daytimo	2073 Telephone Number	SEEL FL	
Enclosed is 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)	S60.00 Filing Certificate of Certified Co (additional cop	of Status &	

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

(Name of the Limited Lability Counse	ny as it now appears on our records.)	
(Name of the Limited Liability Compan (A Florida Limited Li	iability Company)	
The Articles of Organization for this Limited Liability Company vi Florida document number 12200 295437.	were filed on <u>6 -30 - 2027</u>	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabil	lity company here:	
The new name must be distinguishable and contain the words "Limited Liability	ty Company," the designation "LLC" or the abbr	eviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		S
		FCR &
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
		
B. If amending the registered agent and/or registered office a	dd-see on our records onter the name	of the new registered
agent and/or the new registered office address here:	duress on our records, enter the hame	of the new registered
Name of New Registered Agent:	<u> </u>	
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 provisions of all statutes relative to the proper and complete p accept the obligations of my position as registered agent as po- being filed to merely reflect a change in the registered office of company has been notified in writing of this change.	performance of my duties, and I am fai rovided for in Chapter 605, F.S. Or, if	miliar with and this document is

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 **Type of Action** Title **Address** Name MGR 1410 Linhart Ave Ft Hyers, F Richard Grant □ Remove □Remove Remove į i Change 15 \square Add □Remove ____ □Change □ Add Change □Add

____ □Change

						
						
 -		***				
	•		·			
			···		S	,
						; :'
				 	;,—; G	. '
					<u> </u>	
						
					TATE FL	
	· · · · · · · · · · · · · · · · · · ·			<u> </u>		, .
-			<u></u> .			
						
octive date i	f other than the date of fili	ina:		(option:	al)	
effective date is	s listed, the date must be specific a inserted in this block does not	ind cannot be prior to d	late of filing or more t	han 90 days after fili	ng.) Pursuant to 605.	.020
ument's effect	tive date on the Department of	f State's records.	e statutory tiling re	quirements, this da	ne will not be liste	.u a
cord specifies s filed.	a delayed effective date, but n	ot an effective time	, at 12:01 a.m. on ti	he earlier of; (b)	The 90th day after	r the
_	<i>a</i> ~	0 - 0 0				
ed	- 79	. 10LL	,			
	hichmal	IIA-				
	Signature of	a member or authorize	ed representative of a	member		
	_					