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To:

Division of Corporations

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: (850)617-6383

From:

Account Name : LEGALZOOM.COM INC.

Account Number : I20010000062 : (323)962-8600

Fax Number

: (323)389-0502

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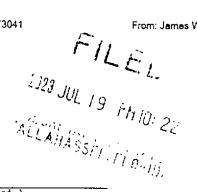
TO:	Registration Se Division of Cor			
SUBJE	WDR TEC	CH LLC		
SUBJE	C1:	Name of Lim	ited Liability Company	
The end	losed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please r	eturn all correspo	ondence concerning this matter	to the following:	
		Cheyenne Moseley		
			Name of Person	
		Legalzoom.com, Inc.		
		· · · · · · · · · · · · · · · · · · ·	Firm/Company	
		101 N Brand Blvd 11th Fl		
		***	Address	
		Glendale, CA 91203		
		wilfredodiaz@bellsouth.net	City/State and Zip Code	
		-	to be used for future annual report note	fication)
For furt	her information c	oncerning this matter, please ca		
Cheyenne Moseley			800 773-0888	
	Name o	f Person		e Telephone Number
Enclose	d is a check for th	ne following amount:		
□ \$ 25	.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Registr	ING ADDRESS: ation Section n of Corporations	STREET/COURI Registration Section Division of Corpor	ก

P.O. Box 6327 Tallahassec, FL 32314

Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

To:

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**



WOR TECH LLC

WOR FOOTI DEC		*37,		
(<u>Name of the Limited Liability Compa</u> (A Florida Limited	ny as it new appears on our records. Liability Company))		
The Articles of Organization for this Limited Liability Company Florida document number L23000126409	were filed on 03/10/2023	and assigned		
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liab	ility company here:			
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC"	or the abbreviation "L.L.C."		
Enter new principal offices address, if applicable:	66 W. Flagler St., Ste. 900 #908	5		
(Principal office address MUST BE A STREET ADDRESS)	Miami, FL 33130			
Enter new mailing address, if applicable:	66 W. Flagler St., Ste. 900 #908	5		
(Mailing address MAY BE A POST OFFICE BOX)	Miami, FL 33130			
registered agent and/or the new registered office address her	<u>2</u> :			
Name of New Registered Agent:				
New Registered Office Address:	Enter Florida street address			
	, Flerida			
	City	Zip Code		
New Registered Agent's Signature, if changing Registered Agent:				
I hereby accept the appointment as registered agent and agre provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent us p being filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my duties, and provided for in Chapter 605, F.	I am familiar with and S. Or, if this document is		
If Char	ging Registered Agent. Signature of	New Registered Agent		

To:

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
AMBR	WILFREDO DIAZ ROMERO		
			🗆 Remove
		66 W. Flagler St., Ste. 900 #9085, Miami, FL 33130	
			Remove
			Change
			Change Add Remove
			Change C
			□ Remove
			D Change
			D Add
			Remove
			□ Change
			🖸 Add
			Remove
			Change

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	pecifies a delayed day after the reco			not an effe	ctive time	, at 12:01	a.m. on	the earlier
	May 22		. 2023					
Dated								
Pated	200	$\overline{}$						

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