L23000242660

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
Special instructions to Filing Officer.

Office Use Only



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c/ Hareldona

COVER LETTER

TO:

TO: Registration S Division of Co			
Vending b	by WC, LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	f Amendment and fee(s) are sub	mitted for filing.	
Please return all corresp	oondence concerning this matter	to the following:	
	Hobart A. Weaver III		
		Name of Person	
	Vending by WC, LLC		
	_	Firm/Company	
	314 Regal Downs Cir		
		Address	
	Winter Garden, Fl. 34787		
		City/State and Zip Code	
	vendingbywc@gmail.com	to be used for future annual report not	If no had
For further information	concerning this matter, please c		The determ)
Hobart A. Weaver III		407 312-9532 at ()	
Name	of Person	Area Code Daytir	ne Telephone Number
Enclosed is a check for	the 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)
Mailing Addro Registration		Street Address: Registration Se	ection
Division of Corporations		Division of Co	rporations
P.O. Box 63 Tallahassee,		The Centre of 2415 N. Monro	Tallahassee oe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION TO OF



2023 JUH-5 AH 7: 38 Vending by WC 11C

nany as it now annears on our i	records)
d Liability Company)	records)
ny were filed on 5/17/2023	
bility company here:	
bility Company," the designation	"LLC" or the abbreviation "L.L.C."
	
e address on our records, <u>c</u>	nter the name of the new register
Enter Florida street d	uldress
	uldress Florida Zip Code
	. Florida
	pany as it now appears on our red Liability Company) ny were filed on 5/17/2023 ability company here: bility Company," the designation

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

<u>Title</u>	Name	Address	Type of Action
			□Add
			Remove
			Change
			🗆 Add
			□Remove
			□Change
			□Add
			□Remove
		·	□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□ Change

	Fitle for Stephani S Weaver should be changed from CEO to AMBR
,	Fitle for Hobart A Weaver III should be changed from CBO to AMBR
,	
•	
•	
-	
•	
(If an ef <u>Note:</u>	ive date, if other than the date of filing: (optional) ective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605,0207 (3) If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the tent's effective date on the Department of State's records.
the recordis fi	d specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the led.
Dated	

Filing Fee: \$25.00

Typed or printed name of signee