## 199000000132

(Re	questor's Name)	
(Ad	dress)	<u> </u>
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(Cit	y/State/Zip/Phon	e #)
PICK-UP	WAIT	MAIL
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(Do	cument Number)	
Certified Copies	_ Certificate:	s of Status
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SUFFICIENCY OF FILTHG

15 MAY -8 PM 4: 33

FILED
285 HAY -8 AM 8: 57

MAY 11 2015 J. BRUCE



CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee FL 32301

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT	NO.	:	I20000000195

REFERENCE : 622700 4305611

AUTHORIZATION Symbolic man

COST LIMIT : \$ 25.00

ORDER DATE : May 8, 2015

ORDER TIME : 3:59 PM

ORDER NO. : 622700-005

CUSTOMER NO: 4305611

## DOMESTIC AMENDMENT FILING

NAME: STRATAGLASS, LLC

EFFECTIVE DATE:

XX ARTICLES OF AMENDMENT
RESTATED ARTICLES OF INCORPORATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

XX PLAIN STAMPED COPY
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Lydia Cohen -- EXT# 62974

EXAMINER'S INITIALS:

2916 HAY -8 AM 8: 57

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Strataglass, LLC (Name of the Limited Liability Comor (A Florida Limited)	any as it now appears on our records.)	
(A Florida Limited	Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number L99000006132	were filed on September 24, 1999 and assigned	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	oility company here:	
WDBJ, LLC	•	
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:	2021 Briggs Road	
Principal office address MUST BE A STREET ADDRESS	Mount Laurel, New Jersey 08054	
	2021 Briggs Road	
Enter new mailing address, if applicable:	Mount Laurel, New Jersey 08054	
Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered or registered agent and/or the new registered office address her		
Name of New Registered Agent:	<b>Single</b>	
New Registered Office Address:	Enter Florida street address S	
·	, Florida সভা 🚡	
-	City Zip Code Co	
New Registered Agent's Signature, if changing Registered Agent:		
hereby accept the appointment as registered agent and agr	ee to act in this capacity. I further agree to comply with the	

If Changing Registered Agent, Signature of New Registered Agent

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 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> Type of Action <u>Name</u> <u>Address</u> \_D Add □ Remove \_ Change □ Remove ☐ Change □ Remove ☐ Change □ Add □ Change SEE AORII □ Kenove ☐ Change DbA □ □ Remove

\_C Change

(If an effective 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 505.02077.  Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as a document's effective date on the Department of State's records.	
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the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:	92° >- ≺ •
the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:	
) The 90th day after the record is filed.	r
Dated May 7 , 2015	}
had had	
Signature of a member or schooled representative of a member	

Page 3 of 3

Filing Fee: \$25.00