

2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L19000186763

Entity Name: NHWT2, LLC**Current Principal Place of Business:**2295 CORPORATE BLVD NW STE 222
BOCA RATON, FL 33431**Current Mailing Address:**2295 CORPORATE BLVD NW STE 222
BOCA RATON, FL 33431**FEI Number:** NOT APPLICABLE**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**CORPORATE CREATIONS NETWORK, INC.
801 US HIGHWAY 1
NORTH PALM BEACH, FL 33408 US*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.***SIGNATURE:**_____
Electronic Signature of Registered Agent_____
Date**Authorized Person(s) Detail :**

Title	MGR
Name	HERRICK, NORTON
Address	THE HERRICK COMAPANY, INC 2 RIDGEDALE AVE
City-State-Zip:	CEDAR KNOLLS NJ 07927

Title	AMBR
Name	HERRICK, NORTON
Address	THE HERRICK COMAPANY, INC 2 RIDGEDALE AVE
City-State-Zip:	CEDAR KNOLLS NJ 07927

Title	AMBR
Name	HERRICK FAMILY 2008 IRREVOCABLE TRUST
Address	THE HERRICK COMAPANY, INC 2 RIDGEDALE AVE
City-State-Zip:	CEDAR KNOLLS NJ 07927

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: NORTON HERRICK**MANAGER****03/26/2021**_____
Electronic Signature of Signing Authorized Person(s) Detail_____
Date