

2022 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	CEO, SECRETARY
Name	HERRICK, NORTON
Address	2295 CORPORATE BLVD NW STE 222
City-State-Zip:	BOCA RATON FL 33431

Title	PRESIDENT, ASST. SECRETARY
Name	HERRICK, MICHAEL
Address	2295 CORPORATE BLVD NW STE 222
City-State-Zip:	BOCA RATON FL 33431

Title	EXEC. VP, ASST. SECRETARY
Name	HERRICK, ELAYNE
Address	2295 CORPORATE BLVD NW STE 222
City-State-Zip:	BOCA RATON FL 33431

Title	EXEC. VP, ASST. SECRETARY
Name	HERRICK, HOWARD
Address	2295 CORPORATE BLVD NW STE 222
City-State-Zip:	BOCA RATON FL 33431

Title	EXEC. VP, TREASURER
Name	HERRICK, EVAN
Address	2295 CORPORATE BLVD NW STE 222
City-State-Zip:	BOCA RATON FL 33431

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**CEO & SECRETARY****02/16/2022**

Electronic Signature of Signing Authorized Person(s) Detail

Date