

LO500011F1F4

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

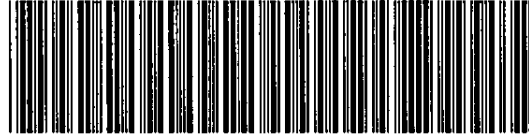
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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02/10/15--01034--003 **30.00

FILED
15 FEB 10 AM 9:11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2015 FEB 10
J. Shivers

BWB INVESTMENTS, LLC

TELEPHONE (813) 224-9100

625 E. TWIGGS STREET, SUITE 100
TAMPA, FL 33602

FACSIMILE (813) 224-9109

February 6, 2015

By Certified Mail:

No. 91 7199 9991 7035 1272 5644

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Re: BWB Investments, LLC

Dear Sir or Madam:


This letter concerns the above referenced matter. Attached is John Bales Attorneys' check number 33736, in the amount of \$30.00, made payable to the Florida Department of State.

The attached check provides payment for the Filing Fee and Certificate of Status Fee associated with the attached Articles of Amendment to Articles of Organization of BWB Investments, LLC.

If you have any questions or comments, please email or call me.

Sincerely,

BWB INVESTMENTS, LLC


John Bales
Managing Member

JCB/mjj

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: BWB Investments, LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

John Bales

Name of Person

BWB Investments, LLC

Firm/Company

9700 Dr. Martin Luther King Jr., St. N., Suite 400

Address

St. Petersburg, FL 33702

City/State and Zip Code

jbales@johnbales.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Matthew Jacobs

at (**727**) **823-9100**

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$25.00 Filing Fee

☒ \$30.00 Filing Fee &
Certificate of Status

☐ \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

☐ \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Page 1 of 3

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	David B. Weinstein	625 E. Twiggs St., Suite 100	<input type="checkbox"/> Add
		Tampa, FL 33602	<input checked="" type="checkbox"/> Remove
MRG	Tracy F. Bales	9700 Dr. Martin Luther King Jr., St. N.,	<input checked="" type="checkbox"/> Add
		Suite 400	<input type="checkbox"/> Remove
		St. Petersburg, FL 33702	
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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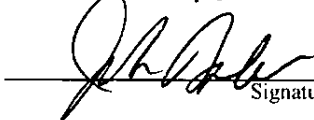
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D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

E. Effective date, if other than the date of filing: _____ (optional)

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated 2.6.2015, _____



Signature of a member or authorized representative of a member

John Bales

Typed or printed name of signee

Page 3 of 3
Filing Fee: \$25.00

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15 FEB 10 AM 9:11
CLERK OF STATE
JAIL AND SPC. FLORIDA