

L10000060252

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

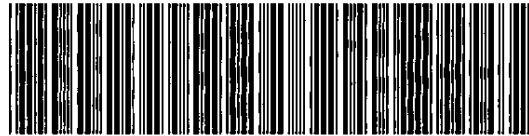
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



500184833755

500184833755
08/30/10--01043--016 **25.00

FILED
10 AUG 30 PM 2:56
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J. BRYAN

AUG 31 2010

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: WELBRD 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:

Robert R Lucas

Name of Person

WELBRD LLC

Firm/Company

285 Grande Way Unit 403

Address

Naples FL 34110

City/State and Zip Code

bob@moxxytrading.com

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

FILED
10 AUG 30 PM 2:56
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

Robert Lucas

Name of Person

at (239)

325-8767

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

WELBRD LLC

Page 1 of 2

