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(Address)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

T. CLINE
APR 13 2012
EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: WC EQUITY GROUP, 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:

KURT WESTFIELD

Name of Person

WC EQUITY GROUP

Firm/Company

711 S. HOWARD #200

Address

TAMPA, FL 33606

City/State and Zip Code

KURT@WCEQUITYGROUP.COM

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

For further information concerning this matter, please call:

KURT WESTFIELD

Name of Person

at (813)

404-6916
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

SECRETARY OF STATE
TALLAHASSEE, FL 32301

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WC EQUITY GROUP, LLC

(A Florida Limited Liability Company)

Page 1 of 2

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

MGR = Manager
MGRM = Managing Member

| <u>Title</u> | <u>Name</u> | <u>Address</u> | <u>Type of Action</u> |
|--------------|-------------|----------------------------------|--|
| MGRM | BRIAN CROWE | 711 S. HOWARD TAMPA, FL 33606 | <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Add <input type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Add <input type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Add <input type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Add <input type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Add <input type="checkbox"/> Remove |

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary)*

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Dated

4/9

2012



Signature of a member or authorized representative of a member

KURT WESTFIELD

Typed or printed name of signee