

L120000081234

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

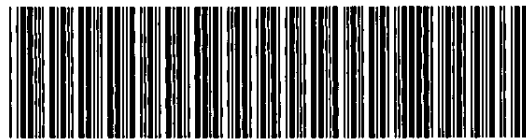
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OCT 16 2012

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: **Registration Section
Division of Corporations**

SUBJECT: FW WPB 2012-1, 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:

ANDREW MAC KENZIE WINN

Name of Person

FW WPB 2012-1, LLC

Firm/Company

290 BARCELONA RD.

Address

WEST PALM BEACH, FL 33401

City/State and Zip Code

andrew.m.winn@gmail.com

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

For further information concerning this matter, please call:

ANDREW MAC KENZIE WINN

Name of Person

at (561)

832-4944

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

FW WPB 2012-1, LLC

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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>
MGR	PICHLER, ELISABETH A.	33 UNION SQUARE WEST, APT. 4R NEW YORK, NY 10003	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGR	FEDYNA, ELISABETH A.	33 UNION SQUARE WEST, APT. 4R NEW YORK, NY 10003	<input checked="" 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.)*

Dated 10TH OF OCTOBER, 2012.

Andrew Mac Kenzie Winn ^{MANAGING MEMBER}
Signature of a member or authorized representative of a member

ANDREW MAC KENZIE WINN

Typed or printed name of signee