

LK3000026579

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

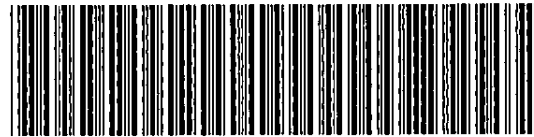
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FILED
13 MAR 11 PM 2:57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

WE OUI! LLC

March 7, 2013

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

Re: We Oui! LLC
Document Number L13000026579

Dear Sir/Madame:

Enclosed you will find an Amendment to amend the principal address of We Oui! LLC.
Also enclosed is our check in the amount of \$25.00 as the filing fee.

Please file this Amendment as indicated above. Please contact our office if you have any questions.

Sincerely,

A handwritten signature in cursive script that reads "Elaine Baker Saman".

Elaine Baker Saman
Managing Member

Encls.

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: WE OUI! 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:

Barbara Schwartz

Name of Person

Weiss Serota Helfman

Firm/Company

200 E. Broward Blvd #1900

Address

Ft. Lauderdale, FL 33301

City/State and Zip Code

samanjan@bellsouth.net

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

For further information concerning this matter, please call:

Barbara Schwartz

Name of Person

at **(954) 763-4242**

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, FLORIDA

13 MAR 11 PM 2:57

FILED

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>
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove

_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove

_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove

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		_____	<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 _____, _____.



Signature of a member or authorized representative of a member

ELAINE BAKER Saman

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00