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COVER LETTER

Division of Corporations
SUBJECT: WASU ENTER PRISES LLC Name of Foreign Limited Liability Company
Dear Sir or Madam:
The enclosed application, certificate and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Dear Sir or Madam: The enclosed application, certificate and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: RANS IT WASU. Name of Person Wasu Enterprises LLC Firm/Company 8204 Borg IA Corret Address DRIADO, 32836 City/State and Zip Code RANS IT. WASU & CAMAIL-Cour
Name of Person
WASU ENTERPRISES LLC Firm/Company
Firm/Company Webs.
8204 BORG IA COURT, Address
Address
DRUADO, 32836
City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Person Area Code & Daytime Telephone Number
Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations MAILING ADDRESS: Registration Section Division of Corporations
Clifton Building P.O. Box 6327
2661 Executive Center Circle Tallahassee, Florida 32314 Tallahassee, Florida 32301

□ \$55 Filing Fee & Certified Copy

□ \$60 Filing Fee,

Certified Copy

Certificate of Status &

Enclosed is a check for the following amount: 25 Filing Fee \$30 Filing Fee &

Certificate of Status

TO: Registration Section

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT BUSINESS IN FLORIDA

SECTION I (1-3 must be completed)

1. Name of limited liability Company as it appears on the records of the Florida Department of State: WASU ENTERRISES LLC
2. Jurisdiction of its organization:
3. Date authorized to do business in Florida: <u>\$\Omega 3 \seta 13 \seta 14</u>
SECTION II (4-7 complete only the applicable changes)
4. New name of the limited liability company:
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must contain "Limited Liability Company," "L.L.C." or "LLC.")
5. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:
6. If the amendment changes person, title or capacity in accordance with 605.0902 (1)(e), indicate that change: ADDITION OF AUTHORISED PERSONS DETAILS:
MRS. SOPHIA WASY, BADY BORGIA COURT, ORLANDO, 32836
7. Attached is an original certificate, if required: no more than 90 days old, evidencing the aforementioned amendment(s), duly authenticated by the official having custody of records in the jurisdiction under the law of which this entity is organized.
MR. RANSIT WASU. Typed or printed name of signee
i yped or printed name of signee

Filing Fee: \$25.00