

# L14000 K47023

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

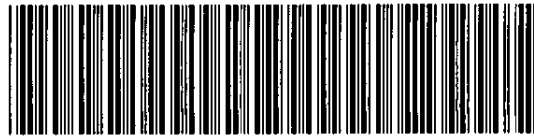
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



500299048985

05/10/17--01033--001 \*\*1075.00

FILED  
17 MAY 10 PM 4:25  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

S Warren  
MAY 11 2017

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** THE WEIGHT, 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:

Michael J. Faehner, Esq.

\_\_\_\_\_  
Name of Person

M. Faehner, Esq., LLC

\_\_\_\_\_  
Firm/Company

600 Bypass Drive, Suite 100

\_\_\_\_\_  
Address

Clearwater, FL 33764

\_\_\_\_\_  
City/State and Zip Code

filings@mfaehner.com

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

For further information concerning this matter, please call:

Michael Faehner

727 443-5190  
at ( )

\_\_\_\_\_  
Name of Person

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

FILED  
MAY 10 PM 4:25  
CLERK OF DISTRICT COURT  
TAMPA, FLORIDA  
By Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Candyman Management, LLC	468 4TH AVENUE SOUTH	<input checked="" type="checkbox"/> Add
		ST PETERSBURG, FL 33701	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	REPKO, ROBERT	468 4TH AVENUE SOUTH	<input type="checkbox"/> Add
		ST PETERSBURG, FL 33701	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

FILED  
MAY 30 PM 4:28  
TALLAHASSEE, FLORIDA  
SECRETARY OF STATE

[illegible]

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

2017

*My Steele*  
Signature of a member or authorized representative

Signature of a member or authorized representative of a member

Michael J. Faehner, Esq.

Typed or printed name of signee

FILED  
17 MAY 10 PM 4:26  
SICREARY OF STATE  
TALLAHASSEE, FLORIDA