

L150000 74655

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

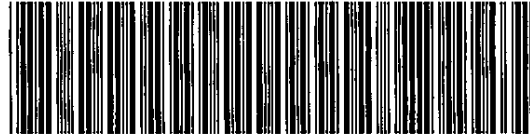
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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07/29/16--01012--008 **25.00

FILED
16 JUL 29 PM 12:41
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

AUG 02 2016
J. HARRIS

LEMANO INVESTMENTS LLC

Tele. 305-283-7509
E-mail: henry@mfunds.us.com

VIA FEDERAL EXPRESS

July 27, 2016

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

RE: ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF LEMANO INVESTMENTS LLC ("LEMANO AMENDMENT") AND ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF HENLET LLC ("HENLET AMENDMENT")

To Whom It May Concern:

On July 19, 2016, our office sent the Lemano Amendment, and the Henlet Amendment to your office for filing with two (2) checks, (i) check number 1041, in the amount of \$25.00 for the Lemano Amendment, (ii) check number 1042, in the amount of \$25.00 for the Henlet Amendment, both checks were written on Bank of America account number 229051359125 (copies attached).

Unfortunately, we recently received notice from Bank of America that there was fraudulent activity on the Bank of America account and we had to close the account. Therefore, enclosed please find two (2) replacement checks representing the filing fees for the Lemano Amendment and the Henlet Amendment.

Should you have any questions or need any additional information, please contact Jennifer Corbo at (305) 905-2103.

Sincerely,



Lemano Investments LLC

P.O. Box 565355, Miami, Florida 33256

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Henlet 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:

Frederic Henry
Name of Person

Henlet LLC
Firm/Company

P.O. Box 565355
Address

Miami, Florida 33256-5355
City/State and Zip Code

Henry @ mfunds.us.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Frederic Henry at (305) 283-7509
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

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

Henlet LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on April 28, 2015 and assigned Florida document number L15000074655.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

3678 William Avenue

Miami, Florida 33133

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

P.O. Box 565355

Miami, Florida 33256-5355

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

3678 William Avenue

Enter Florida street address

Miami

City

Florida

33133

Zip Code

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

RECEIVED
JUL 29 2015
CLERK OF
STATE
FLORIDA

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 | Frederic Henry | 3678 William Avenue | <input type="checkbox"/> Add |
| | | Miami, Florida 33133 | <input type="checkbox"/> Remove |
| | | | <input checked="" type="checkbox"/> Change |
| MGR | Patrick Chollet | 8 Chemin de la Marjolaine | <input type="checkbox"/> Add |
| | | Founex, Switzerland, | <input checked="" type="checkbox"/> Remove |
| | | CH 1297 CH | <input type="checkbox"/> Change |
| MGR | Richard Henry | 46 marville Road | <input type="checkbox"/> Add |
| | | London, UK SW67-BD | <input checked="" type="checkbox"/> Remove |
| | | UK | <input type="checkbox"/> Change |
| | | | <input type="checkbox"/> Add |
| | | | <input type="checkbox"/> Remove |
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA
JUL 16 1994
16 JUL 1994
PM 2:44
Change
Add
Remove
Change

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

This image shows a single page of white paper with horizontal blue or grey ruling lines. The lines are evenly spaced and run across the width of the page. There is no handwriting or other markings on the paper.

E. Effective date, if other than the date of filing: July 19, 2016 (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

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.

Dated July 19, 2016

Signature of a member or authorized representative of a member

Frederic Henr
Typed or printed name of signee

16 JUL 29 PM 12:41
ST. JAMES OF STATE
TALAMAH, FLORIDA