L16 000 159538

(Address)	900306393079
(City/State/Zip/Phone #)	. 12/12/1701019023 **25.
PICK-UP WAIT MAIL (Business Entity Name)	
(Document Number) Certified Copies Certificates of Status	ZOIT DEC 11
Special Instructions to Filing Officer:	AH 9: ₽•
	17 DEC 26
Office Use Only	/20 /



**25.00 123

17 DEC 26 AH 9: 50 FILED



FLORIDA DEPARTMENT OF STATE **Division of Corporations**

December 13, 2017

HENRY WOLFF 1608 CORAL AVE VERO BEACH, FL 32963

SUBJECT: HENRY WOLFF LLC Ref. Number: L16000159538

We have received your document for HENRY WOLFF LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A business entity may not serve as its own registered agent. Please designate an individual or another business entity with an active registration or filing with this office, having a Florida street address identical with that of the registered office.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Dionne M Pijeaux Regulatory Specialist

Letter Number: 717A00025227

COVER LETTER

TO: Registration Se Division of Cor			
SUBJECT:	Henry h	rolff LLC	
- ***	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
		Henry Wolff	
		Henry Wolff LLC Firm/Company	
	l	608 Corál Ave	
	Ven	City/State and Zip Code Knk Wolff Cychoo. Coto be used for future annual report noted.	
	E-mail address: (to be used for future annual report notif	om ication)
For further information o	oncerning this matter, please ca	all:	
Name o	lenry Wolff f Person	at (772) 331-4 Area Code Daytime	Telephone Number
Enclosed is a check for t	ne 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/COURTER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	Wolff LLC	
(<u>Name of the Limited Liability Co</u> (A Florida Lim	ompany as it now appears on our records.) nited Liability Company)	
The Articles of Organization for this Limited Liability Comp	pany were filed on <u>8/35/3016</u>	and assigned
Florida document number <u>L 16 000 159538</u> .		
This amendment is submitted to amend the following:		1
A. If amending name, enter the new name of the limited	liability company here:	
Henry Fely Woff IV The new name must be distinguishable and contain the words "Limited	LLC	
The new name must be distinguishable and contain the words "Limited	Liability Company," the designation "LLC" or th	e abbreviation "L.L.C."
Enter new principal offices address, if applicable:	1608 Coral Anc S) Vero Beach, FL 32963	<u> </u>
(Principal office address MUST BE A STREET ADDRES.	s) Vero Beach, FL 32963	<u> </u>
		20 E
Enter new mailing address, if applicable:		至り
(Mailing address MAY BE A POST OFFICE BOX)		9 50
		
B. If amending the registered agent and/or registere registered agent and/or the new registered office address		ter the name of the ne
Name of New Registered Agent: He	ory Felix Wolff 600 IV	117
	08 COIGI Ave Enter Florido street address	
·		25 -
	Seo Beach , Florida	32963 Zin Code
New Registered Agent's Signature if changing Registered Ag	Cuy	гір Соае
sew medisteren adent's Sidnatiire II anandinu kedisteren ad	DPIII -	

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

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> Address Type of Action __□ Add ☐ Remove _____ □ Change □ Add ☐ Remove ☐ Change ☐ Add ☐ Remove _□ Change □ Add □ Remove _ Change □ Add ☐ Remove

		L Change
		Add
		□ Remove
Page 2 o	f3	

mending any other information, enter change(s) here: (Attach additional sha	
· · · · · · · · · · · · · · · · · · ·	
· · · · · · · · · · · · · · · · · · ·	
	7
 	E T
· · · · · · · · · · · · · · · · · · ·	28 E
	9 5
ective date, if other than the date of filing: n effective date is listed, the date must be specific and cannot be prior to date of filing or more than te: If the date inserted in this block does not meet the applicable statutory filing requirement's effective date on the Department of State's records.	
record specifies a delayed effective date, but not an effective time, a he 90th day after the record is filed.	at 12:01 a.m. on the earlier of:
12/8 2017. Hay Wolf	
Signature of a member or authorized representative of a me	mber
Henry Wolff Typed or printed name of signee	

Page 3 of 3

Filing Fee: \$25.00