

L16 000 159 538

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

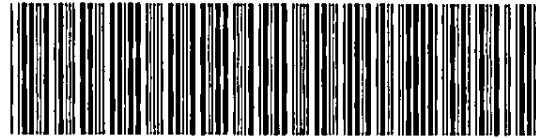
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2017 DEC 11 AM 9:08

FILED
17 DEC 26 AM 9:50

J. LEGGETT
DEC 27 2017

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 Pijaux
Regulatory Specialist

Letter Number: 717A00025227

2017 DEC 26 PM 2:51

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: _____

Henry Wolff 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:

Henry Wolff

Name of Person

Henry Wolff LLC

Firm/Company

1608 Coral Ave.

Address

Vero Beach, FL 32963

City/State and Zip Code

Henry Wolff @ yahoo.com

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

For further information concerning this matter, please call:

Henry Wolff

Name of Person

at (772)

Area Code

321-5080

Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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

Henry Wolff LLC

Page 1 of 3

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>
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
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_____	_____	_____	<input type="checkbox"/> Add
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17 DEC 26 AM 9 50
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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.

Dated 12/8, 2017.

Ken Wall

Henry Wolff

Typed or printed name of signee