

L16000231046

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

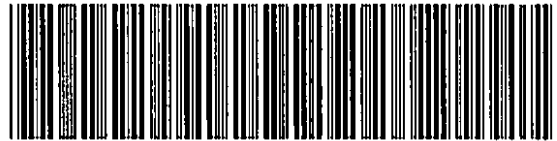
(Business Entity Name)

(Document Number)

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

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07/23/18--01014--011 \*\*25.00

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18 JUL 23 PM 12:19

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

O. SIMMONS  
JUL 28 2018

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** WYNWOOD CAFE LICENSE, 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:

HADDAD, AGNES

Name of Person

WYNWOOD CAFE LICENSE, LLC

Firm/Company

450 NW 27TH ST

Address

MIAMI FL 33127

City/State and Zip Code

INFO@TAXESBYGEORGE.NET

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

For further information concerning this matter, please call:

HADDAD, AGNES

786

397.9195

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

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TALLAHASSEE, 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>
AMBR	MICHEL, ANNA ALEXIS	520 W 51ST TER	<input type="checkbox"/> Add
		MIAMI BEACH FL 33140	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	ALBARET, VALERIE	2333 BRICKELL AVE # 2014	<input type="checkbox"/> Add
		MIAMI FL 33129	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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TALLAHASSEE, FLORIDA

(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)

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

Dated JULY 18th 2018

18th

Signature of a

HADDAD, AGNES

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**Filing Fee: \$25.00**