

L17000072874

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

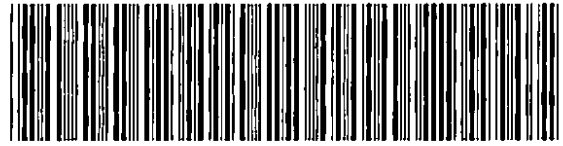
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TODAY

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: WEISS CONSTRUCTION CO OF FLORIDA, 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:

JAKE WEISS

Name of Person

PWC JOINT VENTURE LLC

Firm/Company

41001 GRAND RIVER AVE

Address

NOVI, MI 48331

City/State and Zip Code

jweiss@weiss-construction.com

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

For further information concerning this matter, please call:

TIM JOHNSON

219 313-3230
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 Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

WEISS CONSTRUCTION CO OF FLORIDA, LLC

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>	<u>Address</u>	<u>Type of Action</u>
VP	KEVIN MARKHARDT	41001 GRAND RIVER AVE	<input type="checkbox"/> Add
		NOV, MI 48375	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	DAVID WEISS	41001 GRAND RIVER AVE	<input checked="" type="checkbox"/> Add
		NOVI, MI 48375	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	TIM JOHNSON	41001 GRAND RIVER AVE	<input checked="" type="checkbox"/> Add
		NOVI, MI 48375	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	TED MICHAELIDIS	41001 GRAND RIVER AVE	<input checked="" type="checkbox"/> Add
		NOVI, MI 48375	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Change

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


Signature of a member or authorized representative of a member

Typed or printed name of signee

Filing Fee: \$25.00