

47000080122

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

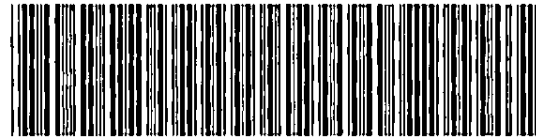
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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10/01/18--01030--001 **50.00

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18 OCT - 1 AM 6:12
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

K SALLY
OCT - 8 2018

EMPOWERING ■ AMERICA'S ■ ENTREPRENEURS

Enitia Corporation

315 West Huron, Suite 240

Ann Arbor, MI 48103

Florida Department of State
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

September 24, 2018

Re: Winter Haven Watersports LLC LLC

Dear Sir or Madam:

Enitia Corporation has been authorized by Ben Groen to file the enclosed Amendment for Winter Haven Watersports LLC LLC. Enitia Corporation is acting only as the Incorporator.

If you need any additional information, you can reach us at

1-877-281-6496 (toll free)
documents@directincorporation.com

We have enclosed an additional \$5.00 for one "Certificate of Status". For your convenience, I have enclosed a self-addressed envelope.

Thank you.

Enitia Corporation

www.enitia.com

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Winter Haven Watersports 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:

Shannon Stahlin

Name of Person

Direct Incorporation

Firm/Company

315 W Huron St, Ste 240

Address

Ann Arbor, MI 48103

City/State and Zip Code

documents@directincorp.com

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

For further information concerning this matter, please call:

Shannon Stahlin

Name of Person

at (877) 281-6496

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|---|---|--|--|
| <input type="checkbox"/> \$25.00 Filing Fee | <input checked="" 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

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18 OCT -1 AM 6:12
SEALING UNIT
TALLAHASSEE, FLORIDA

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

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>
Ambr	ST. ONGE, KEITH	3615 JULIUS ESTATES BLVD	<input type="checkbox"/> Add
		WINTER HAVEN, FL 33881	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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TALLAHASSEE
FLORIDA

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to
SECRET
CONFIDENTIAL

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U.S. DISTRICT COURT
SOUTHERD DISTRICT
ATLANTA, GEORGIA

(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