

L17 000090499

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

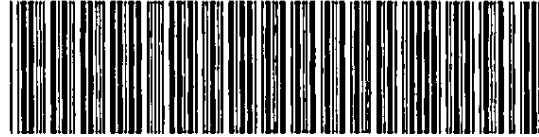
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



400301489994

07/21/17--01012--007 **35.00

FILED
2017 JUL 21 PM 12:39
STATE OF TEXAS
FALL COUNTY

JUL 26 2017
J. HARRIS

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: WELLMERICA, 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:

GARY C. MATZNER

Name of Person

KOPELOWITZ OSTROW

Firm/Company

2800 PONCE DE LEON BLVD., SUITE 1100

Address

CORAL GABLES, FLORIDA 33134

City/State and Zip Code

MATZNER@KOLAWYERS.COM

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

For further information concerning this matter, please call:

GARY C. MATZNER

305 384-7645
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

Page 1 of 3

MGR = Manager
AMBR = Authorized Member

FILED
2022 JUL 1 PM 12:38
RECEIVED
FBI - PHOENIX
CHARGE
ADDITIONAL INFORMATION
RECEIVED

[illegible]

(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) **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 07/072017

Signature of a member or authorized representative of a member

GARY C MATZNER, MGR

Typed or printed name of signee

FILED
2017 JUL 21 PM 12:39
SECRETARY OF STATE
TALLAHASSEE, FLORIDA