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(Address)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: BW GROUP OF BAY COUNTY, 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:

J. ADAM ALBRITTON, ESQ.

Name of Person

ALBRITTON LAW OFFICE

Firm/Company

2901 W. 11TH STREET

Address

PANAMA CITY, FLORIDA 32401

City/State and Zip Code

adam@adamalbrittonlaw.com

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

For further information concerning this matter, please call:

J. ADAM ALBRITTON

\$50 640-3133

at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|---------------------------------------------|------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input checked="" 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

BW GROUP OF BAY COUNTY, LLC

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MGR = Manager
AMBR = Authorized Member

FILED
19
Change
2
Add
AM 10
Remove
46

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

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19

FILING DATE

E. Effective date, if other than the date of filing: _____ (optional)

(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.

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.

Dated APRIL 23, 2019

Signature of a member or authorized representative

J. ADAM ALBRITTON, ESQ.

Typed or printed name of signee