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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: WH Creative Designs,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:

Hugueth Galo

Name of Person

Firm/Company

8421 NARCOOSSEE ROAD apt 9308

Address

Orlando, Florida, 32827

City/State and Zip Code

huguethgalo@gmail.com

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

For further information concerning this matter, please call:

Walther Alvarez

786

325 4675

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 &
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☐ \$55.00 Filing Fee &
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(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

MGR = Manager
AMBR = Authorized Member

AMBR = Authorized Member

Category	Item	Value	Unit	Change
Category 1	Item 1.1	100	kg	<input type="checkbox"/> Add
	Item 1.2	200	kg	<input type="checkbox"/> Remove
	Item 1.3	300	kg	<input type="checkbox"/> Change
Category 2	Item 2.1	400	kg	<input type="checkbox"/> Add
	Item 2.2	500	kg	<input type="checkbox"/> Remove
	Item 2.3	600	kg	<input type="checkbox"/> Change
Category 3	Item 3.1	700	kg	<input checked="" type="checkbox"/> Add
	Item 3.2	800	kg	<input type="checkbox"/> Remove
	Item 3.3	900	kg	<input type="checkbox"/> Change
Category 4	Item 4.1	1000	kg	<input type="checkbox"/> Add
	Item 4.2	1100	kg	<input type="checkbox"/> Remove
	Item 4.3	1200	kg	<input type="checkbox"/> Change
Category 5	Item 5.1	1300	kg	<input type="checkbox"/> Add
	Item 5.2	1400	kg	<input type="checkbox"/> Remove
	Item 5.3	1500	kg	<input type="checkbox"/> Change
Category 6	Item 6.1	1600	kg	<input type="checkbox"/> Add
	Item 6.2	1700	kg	<input type="checkbox"/> Remove
	Item 6.3	1800	kg	<input type="checkbox"/> Change

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

Dated _____,

Signature of a member or authorized representative of a member

Hugueth Galo

Typed or printed name of signee