

622000392878

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

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Certified Copies _____ Certificates of Status _____

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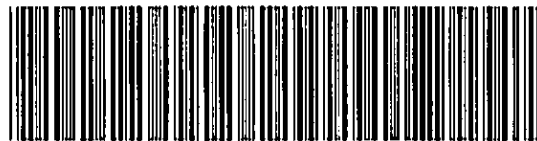
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SECRETARY OF STATE
OFFICE OF REGISTRATION
2022 OCT 11 PM 3:56

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: WNC PF28768, 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:

MARIA G LINO

Name of Person

WNC PF28768, LLC

Firm/Company

601 W 50 ST

Address

MIAMI BEACH, FL 33140

City/State and Zip Code

gbr2lino@gmail.com

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

For further information concerning this matter, please call:

MARIA G LINO

786 556-1596
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

WNC PF28768, LLC

If Changing Registered Agent, Signature of New Registered Agent

[illegible]

[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)

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 _____

MARIA G LINO

Filing Fee: \$25.00