

L220000471312

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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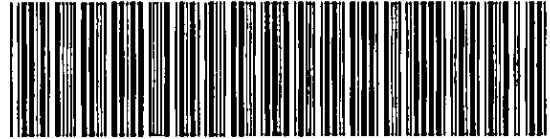
(Business Entity Name)

(Document Number)

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## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT: WARE ENTERPRISE GROUP, 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:

HANIBAL M WARE

\_\_\_\_\_  
Name of Person

WARE ENTERPRISE GROUP, LLC

\_\_\_\_\_  
Firm/Company

44363 FOXTHOM TERR

\_\_\_\_\_  
Address

ASHBURN, VA 20147

\_\_\_\_\_  
City/State and Zip Code

hannibal.ware@gmail.com

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

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SECRETARY OF STATE  
TALLAHASSEE, FL

For further information concerning this matter, please call:

HANNIBAL M WARE

571 5287544  
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

**If Changing Registered Agent, Signature of New Registered Agent**

[illegible]

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TALIAN

SECRETARY OF STATE  
2022 NOV 29 PM 2:19  
FBI

(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)

Dated NOVEMBER 23 2022

*[Handwritten signature]*

HANNIBAL M WARE

Typed or printed name of signee