2000 UNIFORM BUSINESS REPORT (UBR)

APPROVED AND FILED

00 APR 24 PM 12:25

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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DOCUMENT # L99000001788

1. Entity Name
WHL, LLC

Principal Place of Business
2601 E. OAKLAND PARK BLVD., #208
FT. LAUDERDALE FL 33306

Mailing Address
2601 E. OAKLAND PARK BLVD., #208
FT. LAUDERDALE FL 33306-1612

2. Principal Place of Business
c/o WILLIAM H. LEFKOWITZ
3100 N. OCEAN BOULEVARD #1008
FT LAUDERDALE FLORIDA 33308
Suite, Apt. #, etc.
City & State
Zip
Country USA

3. Mailing Address
c/o WILLIAM H. LEFKOWITZ
3100 N. OCEAN BOULEVARD #1008
FT LAUDERDALE FLORIDA 33308
City & State
Zip
Country USA

DO NOT WRITE IN THIS SPACE

MNM

4. FEI Number 65-0914154
Applied For
Not Applicable

5. Certificate of Status Desired ☐ $5.00 Additional Fee Required

6. Name and Address of Current Registered Agent
SCHWARTZ, HOWARD L P.A.
2101 CORPORATE BLVD., SUITE 414
BOCA RATON FL 33431

7. Name and Address of New Registered Agent
Name WILLIAM H. LEFKOWITZ
Street Address (P.O. Box Not Acceptable) 3100 N. OCEAN BOULEVARD #1008
FT LAUDERDALE FLORIDA 33308
City FL Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE William H. Lefkowitz Registered Agent and Manager 4/20/00
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $50.00
Make Check Payable to Department of State

000003244950--6
-05/09/00--01097--007
*****50.00 *****50.00

9. MANAGING MEMBERS / MEMBERS

TITLE	MGR ☐ Delete
NAME	LEFKOWITZ, WILLIAM H
STREET ADDRESS	2601 E. OAKLAND PARK BLVD., #208
CITY-ST-ZIP	FT. LAUDERDALE FL 33306
TITLE	☐ Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

10. ADDITIONS/CHANGES

TITLE	MANAGER, MANAGING MEMBER ☒ Change ☐ Addition
NAME	WILLIAM H. LEFKOWITZ
STREET ADDRESS	3100 N. OCEAN BOULEVARD #1008
CITY-ST-ZIP	FT LAUDERDALE FLORIDA 33308
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

CR2E083 (9/99)

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: William H. Lefkowitz Manager & Managing Member 4/20/00 (954) 564-6784
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER Date Daytime Phone #

WILLIAM H. LEFKOWITZ, MANAGER & MANAGING MEMBER