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		Acc#I20160000072	- 4:1 DW
Name:	HWW Davie	LLC	
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Thank you!

COVER LETTER

		VER LETTE	IX.
TO: Registratio Division of	n Section Corporations		
	Davie, LLC		
SUBJECT:	(Name of For	eign Limited Liability	(Company)
Dear Sir or Madam:			
	rawal and fee(s) are submitte	d for filing.	
Please return all cor	respondence concerning this	matter to the following	ng:
Maria Calabro			
	(Name of Person)		_
Henley USA, LLC			
	(Firm/Company)		_
33 Arch St Suite 30	30		
	(Address)		_
Boston, MA 02110			
	(City/State and Zip Cod	e)	_
For further informat	ion concerning this matter, p	lease call:	
Maria Calabro		617 at (307-5850
(8	lame of Person)	(Area Code	& Daytime Telephone Number)
Division P.O. Box	ion Section of Corporations		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
Enclosed is a check	s for the following amount:		
■\$25 Filing Fee	☐ \$30 Filing Fee & Certificate of Status	□\$55 Filing Fee & Certified Copy	☐ \$60 Filing Fee, Certificate of Status & Certified Copy

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SECREMANDE STATE TALLAHASSEE, FL

HWW Davie, LLC
(Name of limited liability company)
Delaware
(Jurisdiction of its organization)
03/11/2016
(Date registered with Florida Department of State)
M16000002081
(Florida Document Number)
Effective Date, if other than the date of filing: [12/28/2022] (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.) [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.
(Signature of authorized representative)
Garrett Solomon
(Typed or printed name of signee)

Filing Fee: \$25.00