

2019 FLORIDA LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L17000134404

FILED
Oct 15, 2019
Secretary of State
6983015024CC

Entity Name: HENRY FINANCIAL ENTERPRISES LLC

Current Principal Place of Business:

10700 CITY CENTER BLVD
APT 5183
PEMBROKE PINES, FL 33025

Current Mailing Address:

10700 CITY CENTER BLVD
APT 5183
PEMBROKE PINES, FL 33025

FEI Number: 82-2050527

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

HENRY, ASHTON
10700 CITY CENTER BLVD
APT 5183
PEMBROKE PINES, FL 33025 US

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: HENRY ASHTON 10/15/2019
Electronic Signature of Registered Agent Date

Authorized Person(s) Detail :

| | | | |
|-----------------|---------------------------------|-----------------|---------------------------------|
| Title | MGR | Title | MGR |
| Name | HENRY, ASHTON | Name | HENRY, ASHTON |
| Address | 10700 CITY CENTER BLVD APT 5183 | Address | 10700 CITY CENTER BLVD APT 5183 |
| City-State-Zip: | PEMBROKE PINES FL 33025 | City-State-Zip: | PEMBROKE PINES FL 33025 |
| | | | |
| Title | MGR | Title | MGR |
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| | | | |
| Title | MGR | | |
| Name | HENRY, ASHTON | | |
| Address | 10700 CITY CENTER BLVD APT 5183 | | |
| City-State-Zip: | PEMBROKE PINES FL 33025 | | |

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ASHTON HENRY MGR 10/15/2019
Electronic Signature of Signing Authorized Person(s) Detail Date