

**2018 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L17000134404

**FILED**  
**Oct 12, 2018**  
**Secretary of State**  
**CR1494091424**

**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:** Yes

**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:** ASHTON HENRY

10/12/2018

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

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

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

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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

CEO

10/12/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date