

L20000 122014

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

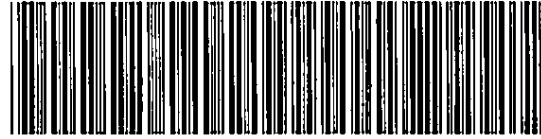
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2020/08/15 3 PM 2:52

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AUG 06 2020

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ORANGE LAKE LOGISTICS, LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fees are submitted for filing.

Please return all correspondence concerning this matter to the following:

DARRYL P. MARIETTA
Name of Person
ORANGE LAKE LOGISTICS, LLC
Firm/Company
22065 NW 54TH COURT RD
Address
MICANOPY FL 32667
City/State and Zip Code
DarrylMarietta01@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Darryl Marietta at (407) 690-4718
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



2020 AUG -3 PM 3:22

FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 10, 2020

DARRYL P. MARIETTA
22065 NW 54TH CT RD
MICANOPY, FL 32667

SUBJECT: DARRYL MARIETTA LLC
Ref. Number: L20000122014

We have received your document for DARRYL MARIETTA LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Rebekah White
Regulatory Specialist II Supervisor

Letter Number: 020A00013492

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

2020-05-03 PM 2:52

DARRYL MARIETTA, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on MAY 5, 2020 and assigned Florida document number 120000122014.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

ORANGE LAKE LOGISTICS, LLC

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

_____, Florida _____

City

Zip Code

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Sonya Smith	22065 NW 54 th Ct Rd Micunopy FL 32667	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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