

L04000025676

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

(Business Entity Name)

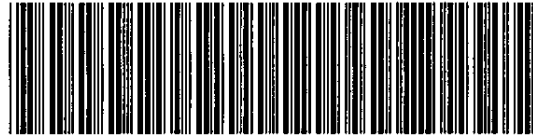
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DIVISION OF CORPORATIONS
06 OCT 30 AM 10:28

J. BRYAN W
OCT 16 2006

J. BRYAN OCT 31 2006



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 16, 2006

AIDA LUZ COLON
LATIN AMERICAN HOMES REALTY, LLC
1943 DR. MARTIN LUTHER KING JR. BLVD.
TAMPA, FL 33607

SUBJECT: LATIN AMERICAN HOMES REALTY, LLC
Ref. Number: L04000025676

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We have received your document for LATIN AMERICAN HOMES REALTY, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You completed the wrong form

We are enclosing the proper form(s) with instructions for your convenience.

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

The registered agent must sign accepting the designation.

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) 245-6043.

Joey Bryan
Document Specialist

Letter Number: 106A00061397

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: LATIN AMERICAN HOMES REALTY, LLC
(Name of Limited Liability Company)

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

AIDA LUZ COLON
(Name of Person)

LATIN AMERICAN HOMES REALTY, LLC
(Firm/Company)

1943 DR. MARTIN LUTHER KING JR BLVD.
(Address)

TAMPA, FLORIDA 33607
(City/State and Zip Code)

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For further information concerning this matter, please call:

AIDA LUZ COLON at (813) 496-1240
(Name of Person) (Area Code & Daytime Telephone Number)

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

☐ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR
BOTH FOR LIMITED LIABILITY COMPANY**

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the limited liability company is: LATIN AMERICAN HOMES REALTY, LLC
2. The mailing address of the limited liability company is : _____
1943 DR. MARTIN LUTHER KING JR. BLVD TAMPA FL 33607
3. Date of filing/registration in Florida April 5, 2004 4. Document number L04000025676

5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

Aida Luz Colon
Name
8000 N. ARMENIA AVE
Address
TAMPA, FL 33604
City, State and Zip

6. The name and address of the new registered agent and/or office:

Aida Luz Colon
Name
1943 DR. MARTIN LUTHER KING JR. BLVD
Florida street address (P.O. Box NOT acceptable)
TAMPA FL 33607
City, State and Zip

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Aida Luz Colon
(Signature of a member or authorized representative of a member)

Aida Luz Colon
(Printed or typed name of signee)

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 608, 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.

Aida Luz Colon
(Signature of Registered Agent)

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

FILING FEE: \$25.00

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