L04000026797

ŧ		
(Re	equestor's Name)	
(Ad	dress)	
·	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
		,

Office Use Only



700109449767

09/17/07--01038--020 **25.00

FILED

O7 SEP 17 PM 12: 31

SECNETARY OF STATE

COVER LETTER

SUBJECT: L O CASTANO INVESTMENT, LLC (Name of Limited Liability Company) The enclosed Articles of Amendment and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: OLGA L. CASTANO (Name of Person) L O CASTANO INVESTMENT, LLC (Firm/Company) 3179 SANTA CRUZ DR (Address) KISSIMMEE, FL 34746 (City/State and Zip Code) (Name of Person) For further information concerning this matter, please call: OLGA L CASTANO (Name of Person) The following amount: Senciosed is a check for the following amount: Senciosed is a check for the following amount: Senciosed is a check for the following amount: All (Area Code & Daytime Telephone Number) Enclosed is a check for the following amount: Senciosed is a check for the following amount: All (Area Code & Daytime Telephone Number) Enclosed is a check for the following amount: All (Area Code & Daytime Telephone Number) Enclosed is a check for the following amount: All (Area Code & Daytime Telephone Number) Enclosed is a check for the following amount: All (Area Code & Daytime Telephone Number) Enclosed is a check for the following amount: All (Area Code & Daytime Telephone Number) Enclosed is a check for the following amount: All (Area Code & Daytime Telephone Number) Enclosed is a check for the following amount: All (Area Code & Daytime Telephone Number) Enclosed is a check for the following amount: All (Area Code & Daytime Telephone Number) Enclosed is a check for the following amount: All (Address) Area Code & Daytime Telephone Number) Enclosed is a check for the following amount: All (Address) Area Code & Daytime Telephone Number) Enclosed is a check for the following amount: All (Address) Area Code & Daytime Telephone Number) Enclosed is a check for the following amount: All (Address) Area Code & Daytime Telephone Number)	Division of Corporations	
(Name of Limited Liability Company) The enclosed Articles of Amendment and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: OLGA L. CASTANO (Name of Person) L O CASTANO INVESTMENT, LLC (Firm/Company) 3179 SANTA CRUZ DR (Address) KISSIMMEE, FL 34746 (City/State and Zip Code) (City/State and Zip Code) (Name of Person) To further information concerning this matter, please call: OLGA L CASTANO (Name of Person) at (407) 624-4883 (Area Code & Daytime Telephone Number) Enclosed is a check for the following amount: Securificate of Status Certificate of Status & Certified Copy (additional copy is enclosed) MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallalabases, FL 32314 2661 Executive Center Circle	SUBJECT. L O CASTANO INVESTMENT, LLC	
Please return all correspondence concerning this matter to the following: OLGA L. CASTANO (Name of Person) LO CASTANO INVESTMENT, LLC (Firm/Company) 3179 SANTA CRUZ DR (Address) KISSIMMEE, FL 34746 (City/State and Zip Code) (Name of Person) For further information concerning this matter, please call: OLGA L CASTANO (Name of Person) at (407) 624-4883 (Area Code & Daytime Telephone Number) Enclosed is a check for the following amount: Securificate of Status Certificate of Status Certificate of Status Certificate Opy (additional copy is enclosed) MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 2661 Executive Center Circle		
Please return all correspondence concerning this matter to the following: OLGA L. CASTANO (Name of Person) LO CASTANO INVESTMENT, LLC (Firm/Company) 3179 SANTA CRUZ DR (Address) KISSIMMEE, FL 34746 (City/State and Zip Code) (Name of Person) For further information concerning this matter, please call: OLGA L CASTANO (Name of Person) at (407) 624-4883 (Area Code & Daytime Telephone Number) Enclosed is a check for the following amount: Securificate of Status Certificate of Status Certificate of Status Certificate of Status Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 2661 Executive Center Circle		
OLGA L. CASTANO (Name of Person) L O CASTANO INVESTMENT, LLC (Firm/Company) 3179 SANTA CRUZ DR (Address) KISSIMMEE, FL 34746 (City/State and Zip Code) (Name of Person) At (407) 624-4883 (Area Code & Daytime Telephone Number) Enclosed is a check for the following amount: State of Status Certificate of Status MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 EOCASTANO REGISTRATION REGISTRATION REGISTRATION REGISTRATION REGISTRATION REGISTRATION REGISTRATION REGISTRATION REGISTRATION STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle	The enclosed Articles of Amendment and fee(s) are submitted for filing.	
(Name of Person) LOCASTANO INVESTMENT, LLC (Firm/Company) 3179 SANTA CRUZ DR (Address) KISSIMMEE, FL 34746 (City/State and Zip Code) (Name of Person) At (407) 624-4883 (Area Code & Daytime Telephone Number) Enclosed is a check for the following amount: S25.00 Filing Fee Certificate of Status Certificate of Status MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Ciffen Building STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building Clifton Corporations Clifton Building Clifton Building Clifton Building Clifton Building Clifton Building Clifton Building Clifton Corporations Clifton Corporations Clifton Corporations Clifton Corporations Clifton Building Clifton Build	Please return all correspondence concerning this matter to the following:	
(Name of Person) LOCASTANO INVESTMENT, LLC (Firm/Company) 3179 SANTA CRUZ DR (Address) KISSIMMEE, FL 34746 (City/State and Zip Code) (Name of Person) At (407) 624-4883 (Area Code & Daytime Telephone Number) Enclosed is a check for the following amount: S25.00 Filing Fee Secrificate of Status Certificate of Status MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 S179 SANTA CRUZ DR (Address) (Address) (Area Code & Daytime Telephone Number) S55.00 Filing Fee & Certificate of Status & Cer	OLCA L CASTANO	
(Firm/Company) 3179 SANTA CRUZ DR (Address) KISSIMMEE, FL 34746 (City/State and Zip Code) Tor further information concerning this matter, please call: OLGA L CASTANO (Name of Person) at (407) 624-4883 (Area Code & Daytime Telephone Number) Enclosed is a check for the following amount: Securificate of Status Certified Copy (additional copy is enclosed) MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 2661 Executive Center Circle		
(Firm/Company) 3179 SANTA CRUZ DR (Address) KISSIMMEE, FL 34746 (City/State and Zip Code) Tor further information concerning this matter, please call: OLGA L CASTANO (Name of Person) at (407) 624-4883 (Area Code & Daytime Telephone Number) Enclosed is a check for the following amount: Securificate of Status Certificate of Status & Certified Copy (additional copy is enclosed) MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 2661 Executive Center Circle	LO CASTANO INVESTMENT LLC	
KISSIMMEE, FL 34746 (City/State and Zip Code) (Area Code & Daytime Telephone Number) (City/State and Zip Code) (City/State and Zip Code) (Area Code & Daytime Telephone Number) (City/State and Zip Code) (Area Code & Daytime Telephone Number) (City/State and Zip Code & C	 	
KISSIMMEE, FL 34746 (City/State and Zip Code) For further information concerning this matter, please call: OLGA L CASTANO (Name of Person) Enclosed is a check for the following amount: \$\sumseteq\$ \$\frac{407}{624-4883}\$ (Area Code & Daytime Telephone Number) Enclosed is a check for the following amount: \$\sumseteq\$ \$\frac{550.00}{624-4883}\$ (Area Code & Daytime Telephone Number) Enclosed is a check for the following amount: \$\sumseteq\$ \$\frac{560.00}{624-4883}\$ (Area Code & Daytime Telephone Number) **Enclosed is a check for the following amount: \$\sumseteq\$ \$\frac{560.00}{624-4883}\$ (Area Code & Daytime Telephone Number) **Enclosed is a check for the following amount: \$\sumseteq\$ \$\frac{560.00}{624-4883}\$ (Area Code & Daytime Telephone Number) **Enclosed is a check for the following amount: \$\sumseteq\$ \$\frac{560.00}{624-4883}\$ (Area Code & Daytime Telephone Number) **Enclosed is a check for the following amount: \$\sumseteq\$ \$\frac{560.00}{624-4883}\$ (Area Code & Daytime Telephone Number) **Enclosed is a check for the following amount: \$\sumseteq\$ \$\frac{550.00}{624-4883}\$ (Area Code & Daytime Telephone Number) **Enclosed is a check for the following amount: \$\sumseteq\$ \$\frac{550.00}{624-4883}\$ (Area Code & Daytime Telephone Number) **Enclosed is a check for the following amount: \$\sumseteq\$ \$\frac{550.00}{620}\$ Filing Fee & Certificate of Status & Certificate of Status & Certificate Opy (additional copy is enclosed) **Enclosed is a check for the following amount: \$\sumseteq\$ \$\frac{550.00}{620}\$ Filing Fee & Certificate of Status & Certificate Opy (additional copy is enclosed) **Enclosed is a check for the following amount: \$\sumseteq\$ \$\frac{560.00}{620}\$ Filing Fee & Certificate of Status & Certificate of Status & Certificate Opy (additional copy is enclosed) **Enclosed is a check for the following amount: \$\sumseteq\$ \$\frac{560.00}{620}\$ Filing Fee & Certificate of Status & Certific	3179 SANTA CRUZ DR	
For further information concerning this matter, please call: OLGA L CASTANO (Name of Person) Enclosed is a check for the following amount: Securificate of Status MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Mailing ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Cartificate and Zip Code) at (407 624-4883 (Area Code & Daytime Telephone Number) Alting Fee & Certificate Opy (Section Possible of Copy (additional copy is enclosed) STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle	(Address)	
For further information concerning this matter, please call: OLGA L CASTANO (Name of Person) Enclosed is a check for the following amount: S25.00 Filing Fee Certificate of Status MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 At (407) 624-4883 (Area Code & Daytime Telephone Number) At (407) 624-4883 (Area Code & Daytime Telephone Number) S55.00 Filing Fee & S60.00 Filing Fee, Certificate of Status & Certificate of Status & Certified Copy (additional copy is enclosed) STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle	· · · · · · · · · · · · · · · · · · ·	
OLGA L CASTANO (Name of Person) at (407) 624-4883 (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 & Certificate of Status & Certified Copy (additional copy is enclosed) MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Clifton Building 2661 Executive Center Circle	(City/State and Zip Code)	
(Name of Person) (Area Code & Daytime Telephone Number) Enclosed is a check for the following amount: \$25.00 Filing Fee	For further information concerning this matter, please call:	
(Name of Person) (Area Code & Daytime Telephone Number) Enclosed is a check for the following amount: \$25.00 Filing Fee	OLGA L CASTANO 407 \ 624-4883	
▼ \$25.00 Filing Fee Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed) MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 S55.00 Filing Fee & Section Section Certified Copy (additional copy is enclosed) STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle		
▼ \$25.00 Filing Fee Certificate of Status MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 S55.00 Filing Fee & S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) STREET/COURIER ADDRESS: Registration Section Division of Corporations Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 S55.00 Filing Fee & S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) STREET/COURIER ADDRESS: Registration Section Division of Corporations Division of Corporations Clifton Building 2661 Executive Center Circle		
Certificate of Status Certified Copy (additional copy is enclosed) Certificate of Status & Certified Copy (additional copy is enclosed) MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Certified Copy (additional copy is enclosed) STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle	-	
Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle	Certificate of Status Certified Copy Certificate of Status & (additional copy is enclosed) Certified Copy	
Division of Corporations P.O. Box 6327 Clifton Building Tallahassee, FL 32314 Control of Corporations Clifton Building 2661 Executive Center Circle		
Tallahassee, FL 32314 2661 Executive Center Circle	Division of Corporations Division of Corporations	
	Tallahassee, FL 32314 2661 Executive Center Circle	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED 07 SEP 17 PM 12: 31 SECRETARY OF STATE TALLAHASSEE, FLORIDA

L O CASTANO INVESTMENT, LLC

(Present Name)
(A Florida Limited Liability Company)

FIRST:	The Articles of Organization were filed on document number <u>L0400026797</u> and assigned
SECOND:	This amendment is submitted to amend the following: ARTICLE V: MGR: LUIS CASTANO
	3179 SANTA CRUZ DR
	KISSIMMEE, FL 34746
Dated	9/11/07
	Signature of a member or authorized representative of a member
	Olag L Castano
	Typed or printed name of signee

Filing Fee: \$25.00