

LOS 000044211

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

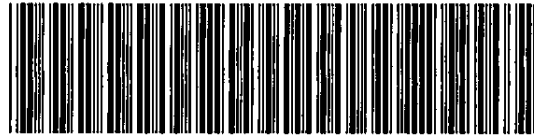
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

LOS-44211
OK



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 1, 2007

ERICA CASTRO
13161 OULTON CIRCLE
ORLANDO, FL 32832

SUBJECT: EC MULTISERVICES LLC
Ref. Number: L05000044211

We have received your document for EC MULTISERVICES LLC and your check(s) totaling \$50.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

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

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) 245-6020.

Tammi Cline
Document Specialist

Letter Number: 007A00030020

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FLORIDA
SECRETARY OF STATE

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: EC MULTISERVICES LLC
(Name of Limited Liability Company)

The enclosed member, managing member or manager resignation and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

ERICA CASTRO
(Contact Person)

EC MULTISERVICES LLC
(Firm/Company)

13161 OULTON CIRCLE
(Address)

ORLANDO FL 32832
(City/State and Zip Code)

For further information concerning this matter, please call:

ERICA CASTRO at (321) 284-7558
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed please find a check made payable to the Florida Department of State for:

☒ \$25 Filing Fee

☐ \$55 Filing Fee &
Certified Copy

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

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TALLAHASSEE, FLORIDA

**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: EC MULTISERVICES LLC

2. The mailing address of the limited liability company is : 13161 OULTON CIRCLE
ORLANDO FL 32832

05-2005

L05000044211

3. Date of filing/registration in Florida

4. Document number

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

PEDRO N. ALZATE

Name

13167 OULTON CIRCLE

Address

ORLANDO FL 32832

City, State and Zip

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

SAUL DELGADO

Name

13161 OULTON CIRCLE

Florida street address (P.O. Box NOT acceptable)

ORLANDO FL 32832 FL

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.

Erica M. Castro
(Signature of a member or authorized representative of a member)

ERICA M. CASTRO
(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.

SAUL DELGADO M.
(Signature of Registered Agent)

**Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314
FILING FEE: \$25.00**

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TALLAHASSEE, FLORIDA