

L060000084859

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

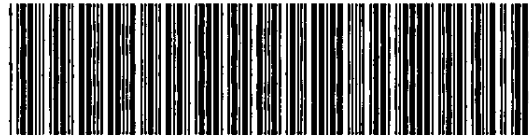
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



700247858037

FILED

2013 MAY 22 PM 1:33

SECRETARY OF STATE
TALLAHASSEE, FL 32313

05/22/13--01011--012 **25.00

MAY 23 2013

J. BRYAN

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Equitable Title of West Orlando, 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:

Sandy Johnston

Name of Person

Equitable Title of West Orlando, LLC

Firm/Company

6985 Wallace Road

Address

Orlando, FL 32819

City/State and Zip Code

sjohnston@equitabletitle.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Sandy Johnston

Name of Person

at (407) 370-6664

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/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

FILED
2013 MAY 22 PM 1:33
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Page 1 of 3

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Dianne Harris	6985 Wallace Road	<input type="checkbox"/> Add
		Orlando, FL 32819	<input checked="" type="checkbox"/> Remove
MGR	F. Larry Joseph	6985 Wallace Road	<input checked="" type="checkbox"/> Add
		Orlando, FL 32819	<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

SECRETARY OF STATE
PAUL AHASSIE, FLORIDA

2013 MAY 22 PM 11:38

FILED

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

Dated May 21, 2013



Signature of a member or authorized representative of a member

Sandy Johnston

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2013 MAY 22 PM 1:38

FILED