## LD1000118439

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
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(Business Entity Name)
(Document Number)
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**EXAMINER** 



700181467077

06/01/10 -01060--021 \*\*25.00

SECRETARY OF STATE

May 20, 2010

Casa Latino Realty Of Deltona LLC Po Box 915814 Longwood, FL 32791-5814

RE: Florida Real Estate Commission

Application Number: 148025, Profession 2502

Dear Sir or Madam:

Thank you for being one of our valued licensees. We appreciate the opportunity to assist you in this matter.

We received your request which we are unable to complete for the following reason(s):

Please update your registration with the Department of State, Division of Corporations. The new qualifying broker you would like to add must be designated as an Officer/Director (Rule 61j2-5.016, Florida Administrative Code)

Once we have received this information from you, we will complete our review of your request. Your application will remain in an incomplete status until such time you have submitted all the requested information for review. If you would like to check the status of your request or if you have any questions, you may visit our website at www.MyFloridaLicense.com. You may also contact the Department by emailing Call.Center@dbpr.state.fl.us or by calling 850.487.1395. To help us process your request more efficiently, please provide your application number on all correspondence. Mail all correspondence, including a copy of this letter, to:

DBPR-Central Intake 1940 N Monroe Street Tallahassee, FL 32399- 0783

Thank you in advance for your cooperation.

Communication of the first transfer of the communication of the communic

KEM

## **COVER LETTER**

' TO: A Registration Section

Division of Corporations					
SUBJECT:	Casa Latin	o Realty of Deltona, LLC			
Sobsect.		Limited Liability Company			
The enclosed Artic	cles of Amendment and fee(s) a	re submitted for filing.			
Please return all co	orrespondence concerning this r	natter to the following:			
	*****	Juan Santa Cruz			
	Name of Person				
	Casa Latino Realty of Deltona, LLC				
		Firm/Company			
		517 Deltona Blvd			
		Address			
		Deltona, Fl 32725			
		City/State and Zip Code			
	F-mail add	jsc@casalatino.com ess: (to be used for future annual report notification)			
For further inform	ation concerning this matter, ple				
	Carol Winslow	at ( 386 ) 575-0006			
Name of Person		Area Code & Daytime Telephone Number			
Englaced is a sheet	k for the following amount:				
\$25.00 Filing F	•				
F I F	MAILING ADDRESS: Registration Section Division of Corporations O. Box 6327 Fallahassee, FL 32314	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301			

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Casa Latino Realty of Deltona, 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 $\frac{12/12/2006}{18439}$ and assigned Florida document number $\frac{L06000118439}{12000000000000000000000000000000000000$					
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the limited liability company here:					
The new name must be distinguishable and end with 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 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.

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>	Address	Type of Action
MGR_	Carol A. Winslo	<u>517 Deltona B</u> Deltona, Fl 32	725 Add Remove
			Add Remove
<u></u>		***************************************	Add Remove
	<del> </del>		Add Remove
			AddRemove
			Add Remove
D. If amen	nding any other inform	ation, enter change(s) here: (Attach add	ditional sheets, if necessary.)
_			
 Dated	May 28		
	Si	tative of a member	
		nec .	

Page 2 of 2

Filing Fee: \$25.00