

L1000002627

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

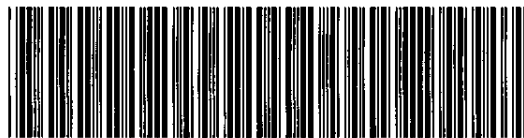
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRET
DIVISION
12 SEP -7 PM 3:03
NATIONS

SEP 10 2012

T. HAMPTON

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Lopez Law, 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:

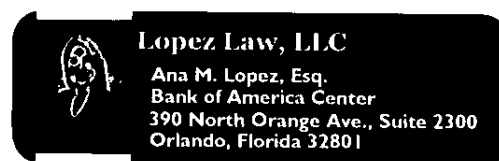
Ana M. Lopez
Name of Person

Lopez Law, LLC
Firm/Company

390 N. Orange Ave., Suite 2300
Address

Orlando, Florida 32801
City/State and Zip Code

alopez@lopezlaw.biz
E-mail address: (to be used for future annual report notification)



For further information concerning this matter, please call:

Ana M. Lopez at (407) 447-2039
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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED

12 SEP -7 PM 4:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

August 30, 2012

ANA M LOPEZ
LOPEZ LAW LLC
390 N ORANGE AVE - STE 2300
ORLANDO, FL 32801

SUBJECT: LOPEZ LAW LLC
Ref. Number: L10000026627

We have received your document for LOPEZ LAW LLC and your check(s) totaling \$25.00. 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 the corrected original and one copy of 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) 245-6051.

Tammy Hampton
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 512A00022165

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. Name of the limited liability company: Lopez Law, LLC

2. (a) Principal office address of limited liability company: 390 N. Orange Ave., Suite 2300

(Note: MUST BE STREET ADDRESS)

Orlando, Florida 32801

(b) Mailing address of limited liability company:

Lopez Law, LLC

(Note: MAY BE POST OFFICE BOX)

390 N. Orange Ave., Suite 2300
Orlando, Florida 32801

03/10/2010

272079024

3. Date of filing/registration in Florida

4. Document number

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Agent:

Ana M. Lopez

Registered Office Address:

501 N. Magnolia Ave.
Orlando, Florida 32801

(b) Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

NEW Registered Agent:

Ana M. Lopez

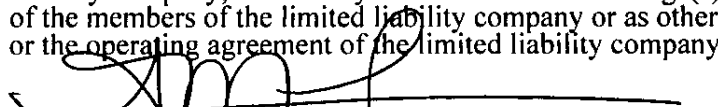
NEW Registered Office Address:

390 N. Orange Ave., Suite 2300

(MUST BE FLORIDA STREET ADDRESS)

Orlando, FL 32801

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.


Signature of a member or authorized representative of a member

Ana M. Lopez

Printed or typed name of signer

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.


Signature of Registered Agent

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

FILING FEE: \$25.00