

L120000/3652

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(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Life Renewed, 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:

Joseph LaRosa  
Name of Person

Life Renewed, LLC  
Firm/Company

1420 Celebration Blvd Suite 200  
Address

Celebration, FL 34747  
City/State and Zip Code

LaRosa Broker @ Gmail - com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Joseph LaRosa at (407) 592-4667  
Name of Person 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

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TALLAHASSEE, FLORIDA

2012 APR 30 AM 10:02

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Life Renewed, LLC

The Articles of Organization for this Limited Liability Company were filed on 1/30/12 and assigned Florida document number L12000013652

Page 1 of 2

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>
MGRM	Joseph LaRose	1420 Celebration Blvd Suite 200 Celebration FL 34747	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	Next Generation of Real Estate, LLC	1420 Celebration Blvd Suite 200 Celebration FL 34747	<input checked="" 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
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

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

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Dated \_\_\_\_\_

Signature of a member or authorized representative of a member

Joseph LaRose

Typed or printed name of signee

FILED  
2022 APR 30 11:02  
TALLAHASSEE, FLORIDA