

L13000033188

(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



100248336661

06/19/13--01012--011 **25.00

FILED
13 JUN 19 AM 11:11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

C. LEWIS
JUN 20 2013
EXAMINER

COVER LETTER

TO: **Registration Section
Division of Corporations**

SUBJECT: **FORTUNATE INVESTMENT, 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:

AMOS ANDRE

Name of Person

FORTUNA INVESTMENT, LLC

Firm/Company

3451 COMMODORE CT

Address

WEST PALM BEACH, FL 33411

City/State and Zip Code

aandre2015@gmail.com

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

For further information concerning this matter, please call:

AMOS ANDRE

Name of Person

at (**561**) **635-2292**

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

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

FILED

19 JUN 19 AM 11: 11

FORTUNATE INVESTMENT, LLC

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

(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 03-05-2013 and assigned
Florida document number L13000033188.

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)

3451 COMMODORE CT
WEST PALM BEACH, FL 33411

Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

SAME

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:

AMOS ANDRE

New Registered Office Address:

3451 COMMODORE CT

Enter Florida street address

WEST PALM BEACH, Florida 33411

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.

Amos Andre
If Changing Registered Agent, Signature of New Registered Agent

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

FILED

18 JUN 19 AM 11:11

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	ANCILIA ANDE	3451 COMMODORE CT WEST PALM BEACH, FL 33411	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGRM	AMOS ANDRE	3451COMMODORE CT WEST PALM BEACH, FL 33411	<input type="checkbox"/> Add <input checked="" 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
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

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

I WOULD LIKE TO REMOVE AMOS ANDRE NAME AS PART OWNER OF THE FORTUNATE INVESTMENT, LLC

AMOS ANDRE ONLY THE REGISTERED AGENT.

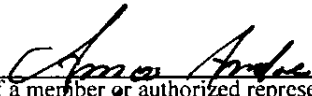
Also AMOS ANDRE Appear twice AS
MGR Please Remove Both of them
I only need him as an Registered Agent.

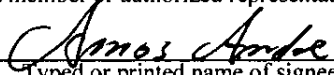
FILED

JUN 19 AM 11:11

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Dated JUNE 14, 2013


Signature of a member or authorized representative of a member


Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00