

L13000122159

(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



600330234116

06/13/19--01016--010 \*\*25.00

FILED  
19 JUL 18 AM 3:59  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

JUL 19 2019  
S. YOUNG



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

June 25, 2019

DENNIS TORNATORE  
PTCP LLC  
3818 EDGEWATER DRIVE  
ORLANDO, FL 32804

SUBJECT: PTCP, LLC  
Ref. Number: L13000122159

We have received your document for PTCP, 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):

**ONLY ONE (1) PERSON CAN BE LISTED AS REGISTERED AGENT**

Please return 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) 245-6050.

Shelia H Young  
Regulatory Specialist II

Letter Number: 919A00012884

# COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** PTCP 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:

Dennis Tornatore

\_\_\_\_\_  
Name of Person

PTCP LLC

\_\_\_\_\_  
Firm/Company

3818 Edgewater Dr

\_\_\_\_\_  
Address

Orlando, FL 32804

\_\_\_\_\_  
City/State and Zip Code

d\_tornatore@yahoo.com

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

For further information concerning this matter, please call:

Dennis Tornatore

407

292-2248

at (\_\_\_\_\_) \_\_\_\_\_

\_\_\_\_\_  
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

**RECEIVED**  
JUL 18 2019

ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF

PTCP 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 8/28/13 and assigned  
Florida document number L13000122159.

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 contain 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)

3818 Edgewater Dr

Orlando, FL 32804

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

3818 Edgewater Dr

Orlando, FL 32804

FILED  
19 JUL 18 AM 4:00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**B. If amending the registered agent and/or registered office address on our records, enter the name of the registered agent and/or the new registered office address here:**

Name of New Registered Agent:

Dennis Tornatore

New Registered Office Address:

3818 Edgewater Dr

*Enter Florida street address*

Orlando

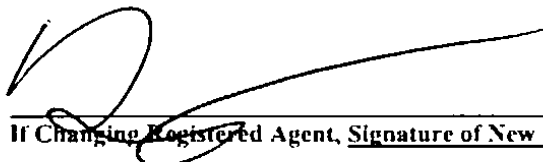
*City*

Florida 32804

*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 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 605, 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 Changing Registered Agent, Signature of New Registered Agent

Transferring Authorized Person(s) authorized to manage, enter the title, name, and address of each person or removed from our records:

MGR = Manager  
AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Amanda Strimpel	679 Gainsboro St	<input type="checkbox"/> Add
		Deltona, FL 32725	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Dennis Tornatore	Dennis Tornatore	<input checked="" type="checkbox"/> Add
		3818 Edgewater Dr	<input type="checkbox"/> Remove
		Orlando, FL 32804	<input type="checkbox"/> Change
MGR	Karen Minor	3818 Edgewater Dr	<input checked="" type="checkbox"/> Add
		Orlando, FL 32804	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

Blank lined area for additional information or notes.

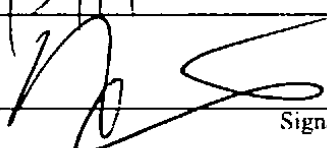

**E. Effective date, if other than the date of filing: \_\_\_\_\_ (optional)**

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:  
(b) The 90th day after the record is filed.

Dated 6/5/19 2019

Signature of a member or authorized representative of a member

Dennis Tomatore & Karen Minor

Typed or printed name of signee

## ASSIGNMENT OF COMPANY INTEREST

The undersigned, Amanda E. Strimpel, as Manager and Member of PTCP LLC, a Florida Limited Liability Company, for good and valuable consideration, the receipt and sufficiency of which are hereby acknowledged, does hereby grant, bargain, sell, transfer, assign and convey all her right and interest in and to PTCP LLC, Florida Limited Liability Company, unto Dennis Tornatore and Karen Minor, to wit: a Company interest representing one hundred percent (100%) of all percentage interest in the company.

Dated 6/5/19, 2019

Amanda Strimpel  
Amanda Strimpel

## ACCEPTANCE OF ASSIGNMENT

The Undersigned, Dennis Tornatore and Karen Minor, does hereby accept the forgoing assignment and agree to be bound by all the terms set forth in the Operating Agreement of PTCP LLC, a Florida Limited Liability Company.

Dated 6/5/19, 2019

Dennis Tornatore  
Dennis Tornatore

Dated 6/5/19, 2019

Karen Minor  
Karen Minor