

L13000156942

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

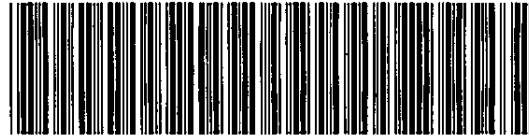
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SEP 14 2015

Y SULKER

COVER LETTER

TO: **Registration Section
Division of Corporations**

SUBJECT: Orlando Metro Ventures 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:

Matthew Petersen

Name of Person

Orlando Metro Ventures LLC

Firm/Company

8802 Black Oak St.

Address

Austin, TX 78729

City/State and Zip Code

leomattp@gmail.com

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

For further information concerning this matter, please call:

Mat Petersen

Name of Person

at (269) 873-6101

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

Orlando Metro Ventures LLC

Page 1 of 3

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

MGR = Manager
AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
AMBR	Green Real Estate Inc	22 W. Washington St.	☐ Add
		Ste. 1500	☒ Remove
		Chicago, IL 60602	☐ Change
AMBR	Triple M Chicago Investments, LLC	2303 N. 44th St.	☒ Add
		#141220	☐ Remove
		Phoenix, AZ 85008	☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
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			☐ Add
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			☐ Change
			☐ Add
			☐ Remove
			☐ Change

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TALLAHASSEE, FLORIDA

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

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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)(b)

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 8/31, 2015

W. J. Parker Peters

Signature of a member or authorized representative of a member

Matthew Petersen

Typed or printed name of signee