



**CORPORATE  
ACCESS,  
INC.**

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236 East 6th Avenue, Tallahassee, Florida 32303  
P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

**WALK IN**

**PICK UP:** 10/9 Glinda

- CERTIFIED COPY** \_\_\_\_\_
- PHOTOCOPY** \_\_\_\_\_
- CUS** \_\_\_\_\_
- FILING** LLC AMEND \_\_\_\_\_

1. ALTAMONTE MANOR LLC  
(CORPORATE NAME AND DOCUMENT #)
2. \_\_\_\_\_  
(CORPORATE NAME AND DOCUMENT #)
3. \_\_\_\_\_  
(CORPORATE NAME AND DOCUMENT #)
4. \_\_\_\_\_  
(CORPORATE NAME AND DOCUMENT #)
5. \_\_\_\_\_  
(CORPORATE NAME AND DOCUMENT #)
6. \_\_\_\_\_  
(CORPORATE NAME AND DOCUMENT #)

2019 OCT -9 AM 9:43  
FILED  
TALLAHASSEE, FLORIDA

**SPECIAL INSTRUCTIONS:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

# COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Altamonte Manor 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:

Gary Abriola

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

GDR Holdings WELO, LLC

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

1737 Dogwood Forest Way

\_\_\_\_\_  
Address

Lake Mary, Florida 32746

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

lakemarygary@aol.com

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

For further information concerning this matter, please call:

Gary Abriola

561 414-4130  
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

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ADMITTED  
FILED



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>
MGRM	Gary Abriola		<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
		1737 Dogwood Forest Way, Lake Mary, FL 32746	<input checked="" type="checkbox"/> Change
MGRM	Dennis J. Abriola		<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
		1737 Dogwood Forest Way, Lake Mary, FL 32746	<input checked="" type="checkbox"/> Change
MGRM	Ronald V. Abriola		<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
		1737 Dogwood Forest Way, Lake Mary, FL 32746	<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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