

L16 0000 41627

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

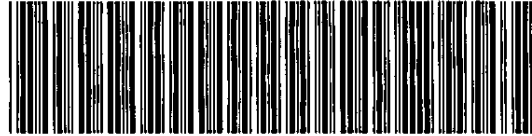
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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06/20/16--01043--022 **25.00

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2016 JUN 20 P 4: 25
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

S Warren

JUN 21 2016

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Sotomayor Home Solutions, 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:

Luis A. Sotomayor
Name of Person

Sotomayor Home Solutions LLC
Firm/Company

3412 Gleaves Ct.
Address

Apopka, FL 32703
City/State and Zip Code

Sotomayor home solutions@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Luis A. Sotomayor at (321) 356-0811
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

Sotomayor Home Solutions LLC

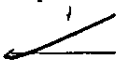
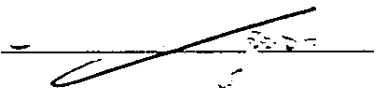
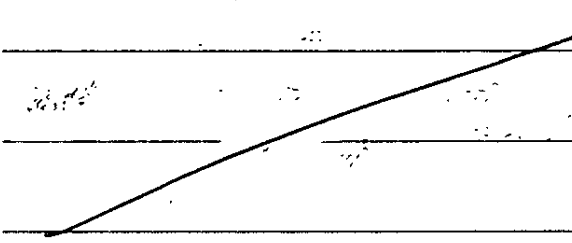
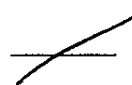
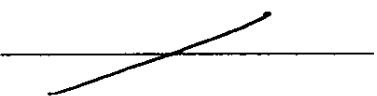
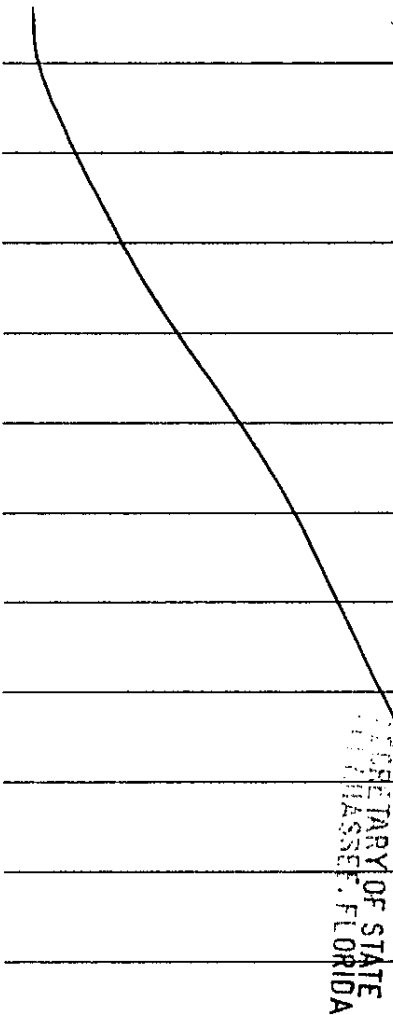
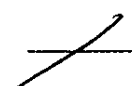
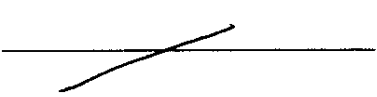
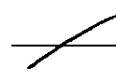
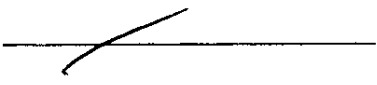
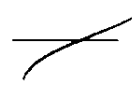
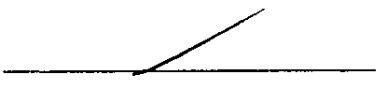
Page 1 of 3

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CLERK OF DISTRICT COURT
JACKSONVILLE, FLORIDA

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>
			☐ Add ☒ Remove ☐ Change
AMBR	Luis A. Sotomayer	3412 Gleaves Ct Apopka FL 32703	☒ Add ☐ Remove ☐ Change
			☐ Add ☐ Remove ☐ Change
			☐ Add ☐ Remove ☐ Change
			☐ Add ☐ Remove ☐ Change
			☐ Add ☐ Remove ☐ Change

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TALLAHASSEE, FLORIDA

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[illegible]

(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)

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.

6/6/2016

Signature of a member or authorized representative

Signature of a member or authorized representative of a member

Luis A. Sofonias

Typed or printed name of signee

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TALLAHASSEE, FLORIDA