

L16000076001

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(Business Entity Name)

(Document Number)

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MULTIHASSET, FLORIDA

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## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** LA FAMILIA MULTI-SERVICE INTERNATIONAL, 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:

MARIA D. SANTANA

Name of Person

LA FAMILIA MULTI-SERVICE INTERNATIONAL, LLC

Firm/Company

2151 GREAT FALLS WAY

Address

ORLANDO, FL 32824

City/State and Zip Code

LAFAMILIAMULTISERVICE15@GMAIL.COM

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

For further information concerning this matter, please call:

MARIA D. SANTANA 407 733-1972  
Name of Person at ( ) 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**

LA FAMILIA MULTI-SERVICE INTERNATIONAL, 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 04/18/2016 and assigned  
Florida document number L16000076001.

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)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

**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:

New Registered Office Address:

*Enter Florida street address*

Florida

*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 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

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>
CEO	CASTILLO, ALVARO M.	8561 W 33RD AVE	<input type="checkbox"/> Add
		HIALEAH, FL 33018	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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(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)

Dated August 29, 2016

Signature of a member or authorized representative

Signature of a member or authorized representative of a member

Typed or printed name of signee

**FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS****Detail by Entity Name****Florida Limited Liability Company**

LA FAMILIA MULTI-SERVICE INTERNATIONAL, LLC

**Filing Information**

Document Number	L16000076001
FEI/EIN Number	NONE
Date Filed	04/18/2016
Effective Date	04/17/2016
State	FL
Status	ACTIVE

**Principal Address**1100 N JOHN YOUNG PKWY  
KISSIMMEE, FL 34744**Mailing Address**2151 GREAT FALLS WAY  
ORLANDO, FL 32824**Registered Agent Name & Address**SANTANA, MARIA D  
2151 GREAT FALLS WAY  
ORLANDO, FL 32824**Authorized Person(s) Detail****Name & Address**

Title CEO

SANTANA, MARIA D  
2151 GREAT FALLS WAY  
ORLANDO, FL 32824

Title CEO

CASTILLO, ALVARO M  
8561 W 33RD AVE  
HIALEAH, FL 33018

← REMOVE  
Maria Santana  
Thank you!!

**Annual Reports**

No Annual Reports Filed

**Document Images**04/18/2016 -- Florida Limited Liability [View image in PDF format](#)