

L16000 199 937

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

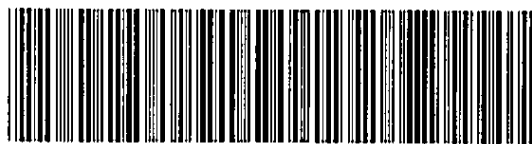
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2019 MAY 30 AM 11:33

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JUN 17 2019

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: REAL ESTATE TITLE & ESCROW, 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:

CHERISSE LOUIDOR

Name of Person

REAL ESTATE TITLE & ESCROW, LLC

Firm/Company

2598 EAST SUNRISE BLVD., SUITE 2104

Address

FT. LAUDERDALE, FL 33304

City/State and Zip Code

PROCESSOR.RETITLE@GMAIL.COM

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

For further information concerning this matter, please call:

CHERISSE LOUIDOR

561 209-4798

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

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>
MGR	CARLINE MAZARD SAINTILUS	2598 EAST SUNRISE BLVD., SUITE 2104 FT. LAUDERDALE, FL 33304	<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	CHERISSE LOUIDOR	600 W 35th STREET SUITE 508 MIAMI, FL 33104	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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SECRETARY OF
ALL AMBROSIA
2019 MAY 30 AM 11:00
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2019 MAY 30 AM 11:05
SECRETARY OF DEFENSE
FALAMAR, FL 32110

FILED
2019 MAY 30 AM 11:35
SECRET
FALAHADIN # 112300

E. Effective date, if other than the date of filing: _____ (optional)

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.

(b) The 90th day after the record is filed.

Dated APRIL 15 2019

Signature of a member or authorized representative of a member

CARLINE MAZARD SAINTILUS

Typed or printed name of signee