

L17000107574

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

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D. SCOTT
JUL 11 2017



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 23, 2017

SANDRA GROZCO CLAIRE
4595 LOVE DR APT 101
ORLANDO, FL 32812

=> correction 4595 COVE DR APT 101
Orlando FL 32812

SUBJECT: ENDLESS LIFE LLC
Ref. Number: L17000107574

We have received your document for ENDLESS LIFE LLC and your check(s) totaling \$60.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please select type of action on page 2 of 3 of application.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Dionne M Pijoux
Regulatory Specialist

Letter Number: 417A00012808

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COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: ENDLESS LIFE 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:

SANDRA OROZCO CLAURE
Name of Person

ENDLESS LIFE LLC
Firm/Company

21595 LOVE DRIVE APT 101
Address

ORLANDO FL 32812
City/State and Zip Code

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

For further information concerning this matter, please call:

SANDRA OROZCO CLAURE at (407) 267-3791
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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TALLAHASSEE, FLORIDA

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

ENDLESS LIFE LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

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TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 5-15-2017 and assigned
Florida document number L17-000107574.

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)

4595 COVE DRIVE APT 101
ORLANDO FL 32812

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

4595 COVE DRIVE APT 101
ORLANDO FL 32812

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:

SANDRA OROZCO CLAURE

New Registered Office Address:

4595 COVE DRIVE APT 101

Enter Florida street address

ORLANDO
City

Florida

32812
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>
MGR	SANDRA OROZCO CLAUDE	4595 COVE DRIVE APT 101	<input checked="" type="checkbox"/> Add
		ORLANDO FL 32812	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	ALENKA P FERREL DE FAJARDO	14761 SWEET ACACIA DR.	<input type="checkbox"/> Add
		ORLANDO FL 32828	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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

I Sandra Orozco Claire
I'm Removing Alenka P FERREL de Fajardo
from the Business, because she's no longer
with us.

E. Effective date, if other than the date of filing: 6 - 20 - 2017 (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 JUNE 20, 2017.


Signature of a member or authorized representative of a member

SANDRA OROZCO CLAIRE
Typed or printed name of signee

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