

L17000131463

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

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MAIL

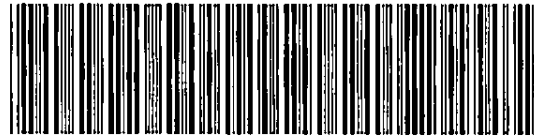
(Business Entity Name)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

D BRUCE
AUG 15 2017

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: FORTUNE 2 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:

ANTONIO REGOJO

Name of Person

REGOJO LAW, PA

Firm/Company

12550 BISCAYNE BLVD STE 110

Address

MIAMI, FL 33181

City/State and Zip Code

aregojo@regojolaw.com

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

For further information concerning this matter, please call:

ANTONIO REGOJO

305 814-8299

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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TALLAHASSEE, FL 32301
SECRETARY OF STATE

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FORTUNE 2 LLC

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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	CAROLINA B ACLAN	4201 CATHEDRAL AV NW	<input checked="" type="checkbox"/> Add
		UNIT #621 W	<input type="checkbox"/> Remove
		WASHINGTON DC 22021	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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Dated AUGUST 11 2017

RICARDO ACLAN, MANAGER

Filing Fee: \$25.00