

L17000135962

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_

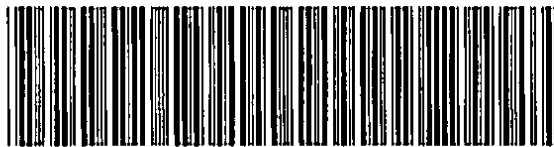
Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Which name changes

W17-62210

Office Use Only



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FILED  
17 AUG 10 AM 9:07  
DIVISION OF CORPORATIONS

Q SIMMONS

AUG 14 2017



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

July 28, 2017

MARTIN MEDINA  
4682 SUTTON TER  
ORLANDO, FL 32811

SUBJECT: ORLANDO FLORIDA AGENT, LLC  
Ref. Number: L17000135962

We have received your document for ORLANDO FLORIDA AGENT, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please indicate if you are adding, removing or changing members listed on page 2 of application. also, need to know if this for the LLC or the Fictitious Name (DBA).

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

Octavia L Simmons  
Regulatory Specialist II

Letter Number: 717A00015308

DEIV  
JUL 10 AM 11:15  
FASSET

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

Orlando Florida Agent LLC

**SUBJECT:** \_\_\_\_\_  
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:

Martin Gonzalez Medina

\_\_\_\_\_  
Name of Person

Real Estate

\_\_\_\_\_  
Firm/Company

4682 Sutton ter

\_\_\_\_\_  
Address

Orlando FL 32811

\_\_\_\_\_  
City/State and Zip Code

martin28realtor@gmail.com

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

For further information concerning this matter, please call:

Martin Gonzalez Medina      407      910-8232  
\_\_\_\_\_  
Name of Person      at (      )      Daytime Telephone Number  
Area Code

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**

Orlando Florida Agent 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 June 22 2017 and assigned  
Florida document number G17000068611.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

Martin Gonzalez Medina LLC

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:**

4682 Sutton Ter

**Principal office address MUST BE A STREET ADDRESS**

Orlando FL 32811

**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>
vp	Luis G Socorro	4682 Sutton ter Orlando fl 32811	<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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COMMUNICATIONS  
DIVISION

FILED

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

I was told that I have to have my legal name as appear on DBPR adding LLC on my name and

I have to be the only person in the company

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**E. Effective date, if other than the date of filing: June 22 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 22 2017

Signature of a member or authorized representative of a member

Martin Gonzalez Medina

Typed or printed name of signer