

L17 000240645

(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:

Office Use Only



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04/31/20 10:19:00

2/20/20 2:26 PM 3:50

OCT 28 2020

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2020 OCT 13 PM 3:30

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

October 13, 2020

KEVIN CARMEAN  
4954 N APOPKA VINELAND RD  
ORLANDO, FL 32818

SUBJECT: 4954 N. APOPKA VINELAND ROAD LLC  
Ref. Number: L17000240645

We have received your document for 4954 N. APOPKA VINELAND ROAD LLC and your check(s) totaling \$55.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

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) 245-6050.

Octavia L Simmons  
Regulatory Specialist II Supervisor

Letter Number: 520A00020079

## COVER LETTER

TO: **Registration Section  
Division of Corporations**

SUBJECT: 4954 N. Apopka Vineland Road 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:

Kevin Carmean

Name of Person

4954 N. Apopka Vineland Road LLC

Firm/Company

4954 N. Apopka Vineland Rd.

Address

Orlando, FL 32818

City/State and Zip Code

Fallon@lakeconwaylandscaping.com

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

For further information concerning this matter, please call:

Kevin Carmean

407 730-3026

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 Address:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

4954 N. Apopka Vineland Road LLC

**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	Kevin Carmean	4954 N. Apopka Vineland Rd.	<input type="checkbox"/> Add
		Orlando, FL 32818	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
MGR	Lake County Landscaping of Orlando, Inc.	4954 N. Apopka Vineland Rd.	<input checked="" type="checkbox"/> Add
		Orlando, FL 32818	<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
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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

2020 08 26 PM 3:50

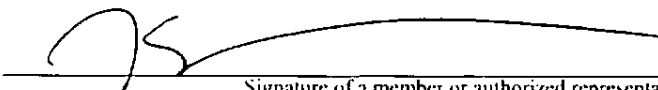
E. Effective date, if other than the date of filing: \_\_\_\_\_ (optional)

(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 August 24, 2020



Signature of a member or authorized representative of a member

Kevin Carmean

Typed or printed name of signee

Filing Fee: \$25.00