

L18000197679

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

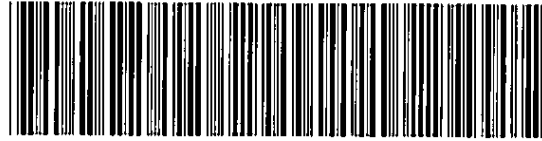
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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09/12/22--01004--027 **25.00

RECEIVED

2022 SEP 12 AM 10:31

FILED

2022 SEP 12 AM 10:06

Sec. of State
TALLAHASSEE, FL

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

ARI DEVELOPMENT & CONSULTING LLC

2022 SEP 12 AM 10:24

TALL

Signature _____

Requested by: SETH

09/09/22

Name

Date

Time

Walk-In

Will Pick Up

Art of Inc. File _____

LTD Partnership File _____

Foreign Corp. File _____

L.C. File _____

Fictitious Name File _____

Trade/Service Mark _____

Merger File _____

Art. of Amend. File _____

RA Resignation _____

Dissolution / Withdrawal _____

Annual Report / Reinstatement _____

Cert. Copy _____

Photo Copy _____

Certificate of Good Standing _____

Certificate of Status _____

Certificate of Fictitious Name _____

Corp Record Search _____

Officer Search _____

Fictitious Search _____

Fictitious Owner Search _____

Vehicle Search _____

Driving Record _____

UCC 1 or 3 File _____

UCC 11 Search _____

UCC 11 Retrieval _____

Courier _____

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Ari Development & Consulting 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:

Luis A. Flores

Name of Person

Ari Development& Consulting LLC

Firm/Company

3700 Farm Bell Place

Address

Lake Mary, FL 32746

City/State and Zip Code

floresari613@gmail.com

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

For further information concerning this matter, please call:

Mimi Bared

305 666-6010
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

FILED

2022 SEP 12 AM 10:06

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

SECOND DIVISION
TALLAHASSEE, FL

If Changing Registered Agent, Signature of New Registered Agent

[illegible]

2022 SEP 12 AM 10:00
DEPT. OF JUSTICE
FBI
FALL CHASSER, FL

2022 SEP 12 AM 10:06
DEPT. OF JUSTICE
FBI

77-10000

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)

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 September 9, _____, 2022

Signature of a member or authorized representative of a member

Luis A. Flores, Manager

Typed or printed name of signee

Filing Fee: \$25.00