

L19000244872

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

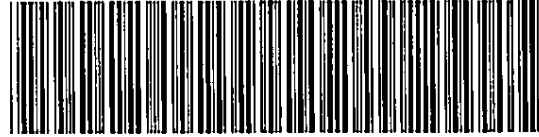
(Business Entity Name)

(Document Number)

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ALL INFORMATION CONTAINED
HEREIN IS UNCLASSIFIED

DATE 10/31/18 BY 1018

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11/15/18 DS

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Retro Fun 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:

Roni Harari
Name of Person
Retro Fun LLC
Firm/Company
5780 los palma vista dr
Address
Orlando FL 32837
City/State and Zip Code
Retrofunllc@gmail.com
E-mail address: (to be used for future annual report notification)

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For further information concerning this matter, please call:

Roni Harari at (407) 432-93-98
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

Retro Fun LLC

Page 1 of 3

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(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 10/25/2018

Donna Han

Signature of a member or authorized representative of a member

Roni Harari

Typed or printed name of signee