

L19000020439

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

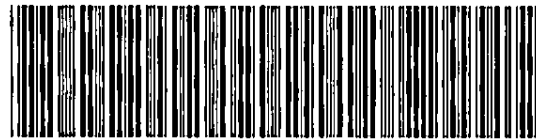
(Document Number)

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2021 MAR 22 AM 11:56

O SIMMONS

APR 13 2021



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

January 27, 2021

BERTHE THERESE ORELUS JOSEPH NOEL  
15383 NE 1ST ST  
MIAMI, FL 33162

SUBJECT: ORELUS LLC  
Ref. Number: L19000020439

We have received your document for ORELUS LLC, however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$25.00.

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: 121A00001963

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Orelus LLC  
Name of Limited Liability Company

(manager name  
Spelling error only)

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Berthe Therese Orelus Joseph Noel  
Name of Person

Orelus LLC  
Firm/Company

15383 NE 1st St  
Address

Miami FL 33142  
City/State and Zip Code

sherrykbowitz@gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Sherry Lebowitz at (305) 496 0687  
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)

SPELLING ERROR IN NAME OF MGR

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

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

**This amendment is submitted to amend the following:**

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

**Mailing address MAY BE A POST OFFICE BOX)**

Zip Code

**If Changing Registered Agent, Signature of New Registered Agent**

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Change

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

Please Correct Spelling:

Bertha T Orelus Joseph Noel

TO:

Berthe T Orelus Joseph Noel

2021 MAR 22 AM 11:56

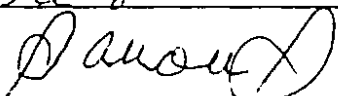
Effective date, if other than the date of filing: 1-18-2019 (optional)

(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.

he 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  
ord is filed.

Dated Dec 8 2020



Signature of a member or authorized representative of a member

Francois Orelus

Typed or printed name of signee