

L19000207722

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

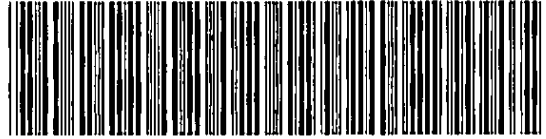
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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5/24/21

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ULV MARKETING 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:

Timothy Castaneda

Name of Person

Firm/Company

1461 Derby Glen Dr

Address

Orlando, FL 32837

City/State and Zip Code

admin@ultimatevacationstays.com

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

FILED
2021 APR -5 PM 3:13
SECRETARY OF STATE
TALLAHASSEE, FL

For further information concerning this matter, please call:

Timothy Castaneda

321 3520643
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

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>
P	Timothy Castaneda	1461 Derby Glen Dr. Orlando FL 32828	<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Mia Castaneda	8615 Commodity Circle Suite #8, Orlando FL 32819	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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 DEPT. OF STATE

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

The fictitious name "Ultimate Vacation Stays" registered G20000040764 needs to be transferred as well to new owner as its under ULV Marketing. We have tried mailing the fictitious department in Tallahassee and never receive a response.

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MAY 15 2021
MAY 15 5:10 PM '21

E. Effective date, if other than the date of filing: March 30, 2021 (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 March 30 2021

Signature of a member or authorized representative of a member

Timothy Castañeda

Typed or printed name of signee