

W21 0000009851

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

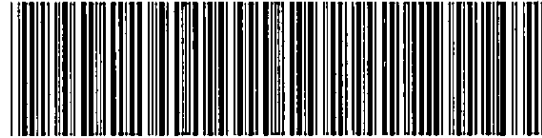
(Business Entity Name)

(Document Number)

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2021 FEB 17 PM 2:40

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ORFAN PUNC, 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:

GOLDA W. CABALLERO

Name of Person

ORFAN PUNC, LLC

Firm/Company

12717 WEST SUNRISE BLVD, UNIT 269

Address

SUNRISE, FL 33323

City/State and Zip Code

CUSTOMERCARE@ORFANPUNC.COM

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

For further information concerning this matter, please call:

GOLDA W. CABALLERO

954

480-3055

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

ORFAN PUNCH, 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>
AMBR	GOLDA W. CABALLERO	12717 WEST SUNRISE BLVD	<input type="checkbox"/> Add
		UNIT 269	<input type="checkbox"/> Remove
		SUNRISE, FL 33323	<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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[illegible]

(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.

Dated FEBRUARY 10 2020

Gondy Caballe

Signature of a member or authorized representative of a member

GOLDA W. CABALLERO

Typed or printed name of signee