

L21000371088

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

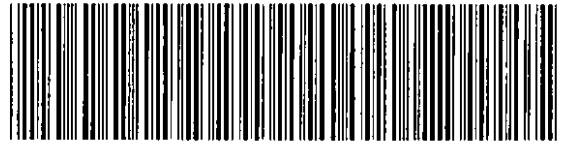
(Business Entity Name)

(Document Number)

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07/13/23--01006--017 **25.00

2023-07-13 10:59

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: DELPORTO 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:

NOEL PORTO

Name of Person

DELPORTO LLC

Firm/Company

7031 NW 169 TERRACE

Address

HIALEAH, FL 33015

City/State and Zip Code

DELPORTOLLC@YAHOO.COM

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

For further information concerning this matter, please call:

NOEL PORTO

786 295 3902
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

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

DELPORTO LLC

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

08/18/2021 9:59

The Articles of Organization for this Limited Liability Company were filed on 08/18/2021 and assigned
Florida document number L21000371088.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

DELPORTO MEDICAL & CONSULTING SERVICES, LLC

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

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

City

Florida

Zip Code

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

[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)

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.

Signature of a member or authorized representative of a member

NOEL PORTO

Typed or printed name of signee

Filing Fee: \$25.00

September 1, 2023

Florida Department of State Division of Corporation

Subject: DELPRTO LLC Document Number L21000371088

Dear Anissa Butler

As per the letter receive, please be advised that DELPORTO LLC doesn't have any relationship with Ball Bros Properties LLC Document Number L21000371068

Find DELPORTO LLC information below

Document Number L21000371088

FEI/EIN Number 87-2272370

Thank you for your assistant in this matter

Feel free to contact me should you have any questions , I'll be glad to assist you.

DELPORTO LLC DocuSigned by:

Signed by :  923a00018710

Name an title: : Noel Porto/ AMBR

Contact # : 786-295-3902

Letter Number: 923a00018710



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 15, 2023

NOEL PORTO
7031 NW 169 TERRACE
HIALEAH, FL 33015

SUBJECT: BALL BROS PROPERTIES LLC
Ref. Number: L21000371068

We have received your document for BALL BROS PROPERTIES LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

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.

Anissa Butler
Regulatory Specialist II

Letter Number: 923A00018710

SEP 08 2023