

L21000522039

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

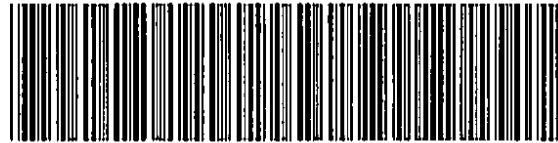
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JAN 10 2023



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10/09/22--61092--014 \$25.00



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 28, 2022

CARMELO A LUIS CAMACHO
872 KENTUCKY WOODS LANE EAST
ORLANDO, FL 32824

SUBJECT: CALL ALEX MOBILE NOTARY LLC
Ref. Number: L21000522039

We have received your document for CALL ALEX MOBILE NOTARY 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):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an administratively dissolved/revoked entity. Names of administratively dissolved/revoked entities are not available for one year from the date of administrative dissolution/revocation unless the dissolved/revoked entity provides the Department of State with an affidavit or letter stating that they have no intention of reinstating, therefore, releasing the name for use to another entity.

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.

Alecia Rivers
Regulatory Specialist II

Letter Number: 422A00028860

AM 10:50

2022 JAN

COVER LETTER

**TO: Registration Section
Division of Corporations**

Call Alex Mobile Notary LLC

SUBJECT: _____
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:

Carmelo A. Luis Camacho

Name of Person

Firm/Company

872 Kentucky Woods Lane East

Address

Orlando, FL 32824

City/State and Zip Code

happyin2010@hotmail.com

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

For further information concerning this matter, please call:

Carmelo A. Luis Camacho

407 3717272

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**

Call Alex Mobile Notary LLC

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

The Articles of Organization for this Limited Liability Company were filed on 12/10/2021 and assigned
Florida document number L21000522039.

This amendment is submitted to amend the following:

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

La Fortuna Land Assets 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)

872 Kentucky Woods Lane East

Orlando, FL 32824

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:

1701 West Wetherbee Road Box 772343

Enter Florida street address

Orlando

City

Florida 32877

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

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

[illegible]

[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.

01/03/2023

Signature of a member or authorized representative of a member

Typed or printed name of signee

Filing Fee: \$25.00