

122000159027

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

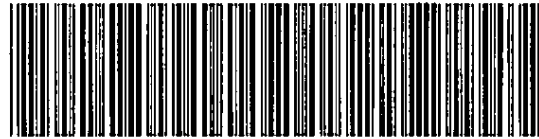
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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FILED
STATE OF PALE
DIVISION OF CORPORATIONS
22 JUL 19 PM 2:58

T. MATTHEWS

JUL 27 2022



RECEIVED

2022 JUL 19 AM 11:58

FLORIDA DEPARTMENT OF STATE
Division of Corporations

SEAL
TALLAHASSEE, FL

June 21, 2022

DANYS DE LA TORRE ORTEGA
9702 N CENTRAL AVE LOT B- 28
TAMPA, FL 33612

SUBJECT: ORTEGA & DE LA TORRE CONSTRUCTION LLC
Ref. Number: L22000159027

We have received your document for ORTEGA & DE LA TORRE CONSTRUCTION LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a FLORIDA CORPORATION, but your entity is a FLORIDA LIMITED LIABILITY COMPANY. Please complete and return the enclosed blank form(s).

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.

Tekayla T Matthews
OPS

Letter Number: 622A00013979

COVER LETTER

TO: **Registration Section**
Division of Corporations

SUBJECT: ORTEGA & DE LA TORRE CONSTRUCTION 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:

DANYS DE LA TORRE ORTEGA

Name of Person

ORTEGA & DE LA TORRE CONSTRUCTION LLC

Firm/Company

9702 N CENTRAL AVE LOT B-28

Address

TAMPA FL 33612

City/State and Zip Code

berthahonore@hotmail.com

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

For further information concerning this matter, please call:

DANYS DE LA TORRE ORTEGA at (813) 364-9004
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**

RECEIVED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
22 JUL 19 PM 2:58

(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 _____ and assigned
Florida document number _____.

This amendment is submitted to amend the following:

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

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

_____, Florida _____

City

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

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if necessary
DIVISION OF CORPORATIONS

22 JUL 13 1116

E. Effective date, if other than the date of filing: _____ (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 15, July . 2022

Signature of a member or authorized representative of a member

DANYS DE LA TORRE ORTEGA

Typed or printed name of signee

Filing Fee: \$25.00