

W22000 276718

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

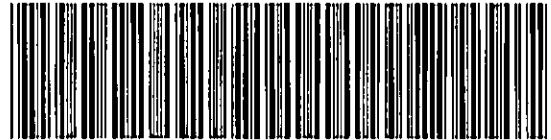
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



800393796668

09/02/22--01009--009 **25.00

FILED
2022 SEP -2 PM 1:57
SECRETARY OF STATE
TALLAHASSEE, FL

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: MILENIUM INVESTMENT 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:

ALEJANDRO GALVEZ

Name of Person

MASTER OFFICE SERVICES

Firm/Company

7169 UNIVERSITY BLVD

Address

WINTER PARK, FL 32792

City/State and Zip Code

MASTEROFFICETEAM@GMAIL.COM

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

For further information concerning this matter, please call:

PEDRO KURODA

407

2558634

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

FILED
2022 SEP -2 PM 1:57
SECRETARY OF STATE
TALLAHASSEE, FL

MILENIUM INVESTMENT 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	PEDRO KURODA	11189 SYLVAN POND	<input type="checkbox"/> Add
		ORLANDO, FL 32825	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
AMBR	ROSA CARBONELL EURIBE	11189 SYLVAN POND	<input type="checkbox"/> Add
		ORLANDO, FL 32825	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
MGR	CESAR E. CARRANZA	11189 SYLVAN POND	<input checked="" type="checkbox"/> Add
		ORLANDO, FL 32825	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

FILED
2022 SEP -2 PM 1:57
SECRETARY OF STATE
TALLAHASSEE, FL

[illegible]

SECRETARY OF STATE
TALCOTT
2022 SEP 12 PM 1:57
FILED
The 90th day after the
e 1901 was not to be listed; as the
g 1901 was not to be listed; as the

Dated AUGUST 30, 2022

Signature of a member or authorized representative of a member

ROSA CARBOWELL FURIBE
Typed or printed name of signee