

~~#~~ L23000088341

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

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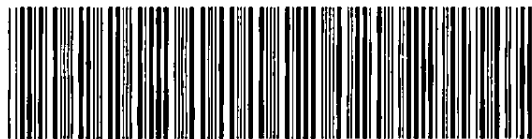
(Business Entity Name)

(Document Number)

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09/17/2024 12:37 PM

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2024 SEP 17 PM 12:37
SEP 17 2024
FEB 17 2024

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: L.L. Portee 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:

Lataya Portee
Name of Person

L.L. Portee LLC
Firm/Company

2701 SW 13th St Apt K16
Address

Gainesville, FL 32608
City/State and Zip Code

lportee.fashion@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Lataya Portee at (941) 226-3985
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**

L. L. Portec 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 2/17/23 and assigned
Florida document number L23 0000 88341.

This amendment is submitted to amend the following:

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

LL Portec Solutions 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)

35 SE 1st Avenue
2nd Floor #209
Ocala, FL 34471

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

35 SE 1st Avenue
2nd Floor #209
Ocala, FL 34471

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:

Registered Agents Inc.

New Registered Office Address:

7901 4th St N Ste 300

Enter Florida street address

St. Petersburg

City

Florida

33702

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.

[Signature]

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.

Kalvin Pardo
Signature of a member or authorized representative of a member

Lataya Porter
Typed or printed name of signer

COVER LETTER

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Division of Corporations

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Name of Person

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llportee.fashion@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Lataya Portee at (941) 226-3988
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|---|--|--|---|
| <input type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input checked="" type="checkbox"/> \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed) |
|---|--|--|---|

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The Centre of Tallahassee
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TO
ARTICLES OF ORGANIZATION
OF**

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(A Florida Limited Liability Company)

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

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(Principal office address MUST BE A STREET ADDRESS)

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2nd Floor #209
Ocala, FL 34471

Enter new mailing address, if applicable:

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Ocala, FL 34471

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Name of New Registered Agent:

Registered Agents Inc.

New Registered Office Address:

7901 4th St N Ste 300

Enter Florida street address

St. Petersburg

City

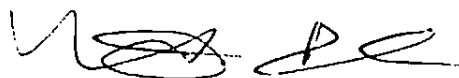
Florida

33702

Zip Code

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

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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]

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

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 September 8, 2024

Signature of a member or authorized representative

Signature of a member or authorized representative of a member

Lataya Porter

Typed or printed name of signee

Filing Fee: \$25.00