

L24000181109

(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



000430789140

06/05/24--01032--005 **30.00

6/20/24
KH

2024 JUN -5 PM 2:16
SEC. OF STATE
TALLAHASSEE, FL

FILED

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: MYSTIC LANDS JOURNEY 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:

ANCIZAR ALZATE

Name of Person

MYSTIC LANDS JOURNEY LLC

Firm/Company

318 ALBAVILLE LN

Address

LONGWOOD, FL 32750

City/State and Zip Code

CZR2681@ICLOUD.COM

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

For further information concerning this matter, please call:

Ancizar Alzate

407 590-9561

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

2024 JUN -5 PM 2:16
TALLAHASSEE, FL
STATE

FILED

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>
MGR	Leonard Johel Cambronero Jimenez	318 Albaville Ln	<input type="checkbox"/> Add
		Longwood FL 32750	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Jose David Arias Villalobos	318 Albaville Ln	<input type="checkbox"/> Add
		Longwood FL 32750	<input checked="" 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
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

2024 JUN -5 PM 2:16
 TALLAHASSEE, FL
 SEC. OF STATE
 TALLAHASSEE, FL

FILED

[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

ANCIZAR ALZATE

FILED
2024 JUN -5 PM 2:16
SEC. OF STATE
TALLAHASSEE FL

Filing Fee: \$25.00