M0500006714

(Re	equestor's Name)			
(Ad	ldress)			
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(C)	ty/State/Zip/Phone	- (1)		
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(Document Number)				
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FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

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COVER LETTER

Division of Corporations	··
SUBJECT: Orltel LLC	
	Limited Liability Company
Dear Sir or Madam:	
The enclosed application, certificate and fee(s) are	e submitted for filing.
Please return all correspondence concerning this r	matter to the following:
Rick Franzblau, Esq.	
Name of Person	
Richard Franzblau LLC	
Firm/Company	
1802 N. Alafaya Trail, Sui	ito 150
Address	100
Orlanda El 22026	
Orlando, FL 32826	
City/State and Zip Code	
rick@franzblauesq.com	
E-mail address: (to be used for future annual re	port notification)
For further information concerning this matter, ple	ease call:
Rick Franzblau	, _t 407 770-2520
Name of Person	Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314
Enclosed is a check for the following amount: \$25 Filing Fee \$30 Filing Fee & Certificate of Status CR2E055 (9/15)	S55 Filing Fee & S60 Filing Fee, Certified Copy Certified Copy Certified Copy

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT **BUSINESS IN FLORIDA**

SECTION 1 (1-4 must be completed)

1. Name of limited liability Company as it appear	rs on the records of the Florida Department of	
State: Orltel, LLC		-
Enter new principal office address, if applicable:		
(<u>Principal office address</u> <u>MUST BE A STREET ADDRESS</u>)		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
2. The Florida document number of this limited lia	ability company is: M0500006714	
3. Jurisdiction of its organization: Delaware		_
4. Date authorized to do business in Florida: 12/	/07/2005	
SECTION II (5-9 complete only the applicable		
5. New name of the limited liability company: (mus	st contain "Limited Liability Company, " "L.L.C.," or "LLC."	·')
copy of the written consent of the managers or ma must contain "Limited Liability Company," "L.L.C	,	ame
6. If amending the registered agent and/or registered registered agent and/or the new registered office agent.	ed officer address on our records, enter the name of the new address here:	SECRETA
Name of New Registered Agent:		OF COL
New Registered Office Address:	P . P . I C	AM.
	7	A ATE
	City , Florida 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.

itle/ Capacity	Name	Address	Type of Action
MGR	Kiran Shah	16908 Cherry Valley CT	■Add
		Wildwood,MO 630	40 Remov
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<u>_</u> _			Add
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			Add
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aforemention	under the law of which this entity is	et by the official having custody of records in the deganized.	Removing Removing 18 NAR 20 AM 9: 9

Filing Fee: \$25.00