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EXAMINER

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COVER LETTER

TO: Registration Séction Division of Corporations		
SUBJECT: Radriquez Torrecilla 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:		
Diana Rodriaul? Name of Person	2011 TALIS	
Firm/Company	APR 28	Automate Carton
12465 Sw 120 And	28 PHIZ: 14 CRY OF STAIR SSEE, FLORID	
Miami, FL 33/86. City/State and Zip Code	ORIGA	
E-mail address: (to be used for future annual report notification)		
For further information concerning this matter, please call:		
Diona Rodri aul 2 at (786) 255 0346 Name of Person Area Code & Daytime Telephone Number		
Enclosed is a check for the following amount:		
(additional copy is enclosed) Certified	te of Status &	ed)

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Rodrique	Morrecilla LLC	
	pility Company as it now appears on our records. Fida Limited Liability Company)	ords.)
The Articles of Organization for this Limited Liabili	ity Company were filed on 1/7/11	and assigned
This amendment is submitted to amend the following		2011 APR
A. If amending name, enter the new name of the	imited liability company nere:	R 28
The new name must be distinguishable and end with the "L.L.C."	words "Limited Liability Company," the design	gnation LLC on the abbreviation
Enter new principal offices address, if applicable	<u> </u>	
(Principal office address MUST BE A STREET A)	DDRESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX	<u></u>	
B. If amending the registered agent and/or re registered agent and/or the new registered office a	egistered office address on our records, address here:	enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida s	treet address
	City , FIG	orida 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 dulies, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, 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 amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing-Member being added or removed from our records:

MGR = Manager

MGRM = Managing Member **Title Address** <u>Name</u> **Type of Action** ☐ Add^{*} Remove ☐ Add Remove Add Remove Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Signature of a member or authorized representative of a member Diana Rodriaul 7
Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00