

L11000136989

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

(Business Entity Name)

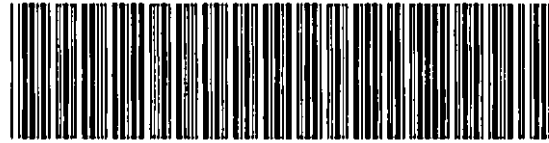
(Document Number)

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11/05/20--01015--022 \*\*43.75

FILED  
CLERK OF STATE  
111 N. 4TH ST. STATION  
21 JAN 12 PM 1:49

*Amend*

FEB 1 2011

D CUSHING

# COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** TACOS AL CARBON OF LAKE WORTH 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:

CARLOS MIQUEL  
Name of Person

MIQUEL ACCOUNTING SERVICE INC  
Firm/Company

5100 S DIXIE HWY STE 10  
Address

WEST PALM BEACH, FL. 33405  
City/State and Zip Code

CARLOS@MIQUELACCOUNTING.COM  
E-mail address: (to be used for future annual report notification)

FILED  
STATE  
CORPORATION  
21 JAN 12 PM 1:10

For further information concerning this matter, please call:

CARLOS MIQUEL at ( 561 ) 588-8878  
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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

December 14, 2020

CARLOS MIQUEL  
5100 S DIXIE HWY  
STE 10  
WEST PALM BEACH, FL 33405

SUBJECT: TACOS AL CARBON OF LAKE WORTH LLC  
Ref. Number: L11000136989

We have received your document and check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The form you submitted is for a PROFIT CORPORATION, but your entity is a LIMITED LIABILITY COMPANY. Please complete and return the enclosed blank form(s). All pages must be returned in order to file the document.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Querida R Moore  
Regulatory Specialist II

Letter Number: 320A00025253

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

TACOS AL CARBON OF LAKE WORTH LLC

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

21 JAN 12 PM 1:49  
STATE OF FLORIDA  
DEPARTMENT OF STATE

The Articles of Organization for this Limited Liability Company were filed on 12/06/2011 and assigned

Florida document number L11000136989

This amendment is submitted to amend the following:

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

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) \_\_\_\_\_  
\_\_\_\_\_

Enter new mailing address, if applicable: \_\_\_\_\_  
(Mailing address MAY BE A POST OFFICE BOX) \_\_\_\_\_  
\_\_\_\_\_

**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: \_\_\_\_\_

New Registered Office Address: \_\_\_\_\_  
*Enter Florida street address*  
\_\_\_\_\_, Florida \_\_\_\_\_  
*City 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.*

\_\_\_\_\_  
**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:**

MGRM = Manager  
 AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	LUIS R DELGADO CONDE	3998 HOLDEN LANE	<input checked="" type="checkbox"/> Add
		LAKE WORTH, FL. 33461	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGRM	GRACIA GONZALEZ	230 PERRY AVE	<input checked="" type="checkbox"/> Add
		GREENACRES, FL. 33463	<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

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

Lined area for amending information.

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.

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 January 7, 2021.

Eloisa Delgado
Signature of a member or authorized representative of a member

Eloisa Delgado
Typed or printed name of signee