## L12000019935

(Re	equestor's Name)	_
•		
(Ad	ldress)	
(Ad	ldress)	
, ,,,,,		
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
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	· · · · · · · · · · · · · · · · · · ·	
(Bu	isiness Entity Nar	ne)
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Certified Copies	Certificates	s of Status
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Special Instructions to	Filing Officer:	
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J. SAULSBERRY EXAMINER

DCT 29 2012

## **COVER LETTER**

Division of Co.			·		
SUBJECT:	Taquei	ria Memo LLC	3 4	•	
		ted Liahility Company		,	
			~	•	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.			•
Please return all corresp	ondence concerning this matter	to the following:			•
	·	Name of Person			
	A	0.00.00.00.00.00.00.00.00.00.00	•		
	Accountin	g & Professional Services, Inc Firm/Company			
		rimi/Company			
		329 A Franklin St.			•
	·	Address			
		Ocoee, FL 34761			
		City/State and Zip Code		型。 歸	
	•		-	T 75	-a simila
	E-mail address: (	to be used for future annual report notification	on)		A A
For further information	concerning this matter, please of	call:	• .	OCT 25 AF	anggggair 2 cangs t
	F Ruiz	at ( 407 ) 65	6-3883	CT TO THE OP	
Name	of Person	Area Code & Daytime Te	lephone Number	B 30 DEIDA	z ~
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)	Certified	e 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

## Taqueria Memo LLC

(Name of the Limite)	A Florida Limited L	iability Company)	1 our records.)	. !! !	
The Articles of Organization for this Limited I Florida document numberL1200001		were filed on	02-10-2012	and assigned	
This amendment is submitted to amend the fol	lowing:	,			
A. If amending name, enter the new name	of the limited liab	ility company here:	• •	and the second s	
The new name must be distinguishable and end w "L.L.C."	rith the words "Limi	ted Liability Company,	" the designation "L	LC" or the abbreviation	
Enter new principal offices address, if appli	cable:				
(Principal office address MUST BE A STREET ADDRESS)					
				3	
Enter new mailing address, if applicable:		418 Whittier Ave	·		
(Mailing address MAY BE A POST OFFICE	EBOX)	Ocoee, FL 3476	51		
B. If amending the registered agent and registered agent and/or the new registered of			records, enter t	the name of the new	
Name of New Registered Agent:	Jorge Torre	S	•	<u> </u>	
New Registered Office Address:	418 Whittie				
	Enter Florida street address				
		Ocoee	, Florida	34761	
New Registered Agent's Signature, if changing	Registered Agent:	City		Zip[Code	
I hereby accept the appointment as register the provisions of all statutes relative to the accept the obligations of my position as region filed to merely reflect a change in the company has been notified in writing of this	red agent and agr proper and comp gistered agent as e registered office	ree to act in this capa lete performance of provided for in Chap	my duties, and I of ter 608, F.S. Or,	am familiar with and if this Hocument is nited liability	

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 Name Address **Type of Action MGRM** Ever E Aparicio 10082 Iverson Dr. ☐ Add ✓ Remove Orlando, FL 32832 MGRM Jorge Torres 418 Whittier Ave. ✓ Add Ocoee, FL 34761 Remove ∏Add ☐ Remove Add Remove  $\square$ Add Remove Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary). October,22 2012 Dated Special and a member or authorized representative of a member Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00