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MAR 2 6 2015

T. BROWN

COVER LETTER

TO: Registration Secti Division of Corpo		<i>:</i> •	
ABRE LA	BOCA LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of Ar	nendment and fee(s) are sub	mitted for filing.	
Please return all correspond	ence concerning this matter	to the following:	
	JOSE L BLANCO		
		Name of Person	
	ABRE LA BOCA LLO	С	
		Firm/Company	
	29 S SEMORAN BL	VD	
		Address	
	ORLANDO FLORID	A 32807	
		City/State and Zip Code	
	E-mail address: (to be used for future annual report notifi	cation)
For further information con-	cerning this matter, please ca	ali:	
JOSE L BLANCO		407 925-5318	
Name of P	erson	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/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

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

ABRE LA BOCA LLC

ART	TICLES OF AN	MENDMENT	
	TO		ecords.) 09, 2015 and assigned
ARTI	CLES OF OR	GANIZATION	75. EL
	OF		Mr. A.
			10gg, 18 10 0
ABRE LA BOCA LLC			14507 1413
(Name of the Limit	ed Liability Company a	is it now appears on our rillity Company)	ecords.)
		my company)	10372
The Articles of Organization for this Limited Li	ability Company wer	re filed on MARCH	09, 2015 and assigned
Florida document number L15000045463	·		
			
This amendment is submitted to amend the follo	owing:		
A. If amending name, <u>enter the new name of</u>	the limited liability	company here:	
The monetage name, energy the new name of	the mineta mapine,	company nere	
The new name must be distinguishable and end with the	eronda "I imitad I inhilitu	Company " the designation	a "I I C" on the abbreviation "I I C"
The new name must be distinguishable and end with the v	words Emilied Elability	Company, the designation	ELC of the abbreviation E.L.C.
Enter new principal offices address, if applica	able:		
(Principal office address MUST BE A STREE	T ADDRESS)		
	_		
Entenness meiling address if annicables			
Enter new mailing address, if applicable:	_		
<u>(Mailing address MAY BE A POST OFFICE)</u>	<u></u>		
B. If amending the registered agent and/or registered agent and/or the new registered of		address on our rec	cords, <u>enter the name of the new</u>
registered agent and/or the new registered on	nce address here.		
	JOSE L BLAN	C O	
Name of New Registered Agent:	JOSE E BEATT		
New Registered Office Address:	29 S SEMORA	N BLVD	
		Enter Florida street a	ddress
	ORLANDO		, Florida <u>32807</u>
		City	Zip Code
Nam Baristanad Agant's Signature if changing D	agistand Acont-		

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 the Managers or Authorized Member on our records, <u>enter the title, name, and address of each Manager or Authorized Member being added or removed from our records</u>:

MGR =	Manager	
AMBR =	Authorized	Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	CARLA AGUIRRE	29 S SEMORAN BLVD ORL FLOR	IDA 3. □ Add
			· Remove
			Remove
			Add
			Remove
			Add
			Remove
			Add
			□ Remove
			☐ Remove
			<u>.</u>

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ate this document is filed by the Florida d MARCH 24	a Department of State)	

Page 3 of 3

Filing Fee: \$25.00