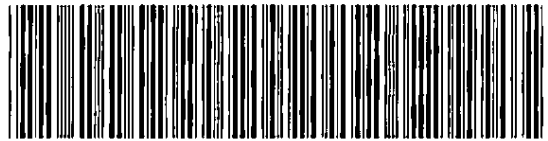


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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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TALLAHASSEE, FL

FEB 14 2024
D CUSHING

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: AMAYA'S CENTENARIO NIGHT CLUB, L.L.C.

DOCUMENT NUMBER: L18000233399

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

ELSI ONA
Name of Contact Person

AMAYA'S CENTENARIO NIGHT CLUB, L.L.C.
Firm/ Company

751 SW 7TH STREET #02
Address

POMPANO BEACH, FL 33060
City/ State and Zip Code

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

For further information concerning this matter, please call:

ELSI ONA at (561) 563-3873
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

- \$35 Filing Fee \$43.75 Filing Fee & Certificate of Status \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)

Mailing Address
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address
Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2024 JAN 30 PM 12:16

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Amaya's Centenario Night Club, 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:

Elsi Ona
Name of Person

Amaya's Centenario Night Club, LLC
Firm/Company

751 SW 7th STREET # 02
Address

Pompano Beach, FL 33060
City/State and Zip Code

onaelsi@yahoo.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Elsi Ona at (561) 563-3873
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)

*DA already sent in payment. **

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 7, 2023

ELSI ONA
AMAYA'S CENTENARIO NIGHT CLUB, LLC
751 SW 7TH STREET #02
POMPANO BEACH, FL 33060

SUBJECT: AMAYA'S CENTENARIO NIGHT CLUB, LLC.
Ref. Number: L18000233399

We have received your document for AMAYA'S CENTENARIO NIGHT CLUB, LLC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a Corporation, but your entity is a Limited Liability Company. Please complete and return the enclosed blank form(s).

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.

Diane Cushing
Operations Manager A

Letter Number: 223A00027906

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

Amaya's Centenario Night Club, LLC

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

The Articles of Organization for this Limited Liability Company were filed on _____ and assigned Florida document number 218000233399.

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)

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SECRETARY OF STATE
TALLAHASSEE, FL

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:

Ana Cuadra

New Registered Office Address:

80 SW 9th ST - #2000

Enter Florida street address

Miami

City

Florida

33130

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.

Ana Cuadra

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:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
<u>mbr</u>	<u>Roger Amaya</u>	<u>199 S. State Rd. 7</u>	<input type="checkbox"/> Add
		<u>Margate, FL 33068</u>	<input checked="" type="checkbox"/> Remove
		_____	<input type="checkbox"/> Change
<u>President</u>	<u>Elsi J. Ona</u>	<u>751 SW 7th St. #02</u>	<input checked="" type="checkbox"/> Add
		<u>Pompano Beach, FL 33060</u>	<input type="checkbox"/> Remove
		_____	<input type="checkbox"/> Change
<u>Vice-president</u>	<u>Roger Amaya</u>	<u>199 S. State Rd. 7</u>	<input checked="" type="checkbox"/> Add
		<u>Margate, FL 33068</u>	<input type="checkbox"/> Remove
		_____	<input type="checkbox"/> Change
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
		_____	<input type="checkbox"/> Change
_____	_____	_____	<input type="checkbox"/> Add
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		_____	<input type="checkbox"/> Remove
		_____	<input type="checkbox"/> Change

