

11/21/23, 5:28 PM

Division of Corporations

H230004021873

L21000028531

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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((H230004021873))



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To: Division of Corporations
Fax Number : (850)617-6383

From: Account Name : SACONSA GROUP LLC
Account Number : I20200000187
Phone : (786)757-2436
Fax Number : (786)513-5977

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: _____

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
BAGUALES LLC

| | |
|-----------------------|---------|
| Certificate of Status | 0 |
| Certified Copy | 0 |
| Page Count | 01 |
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Corporate Filing Menu

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COVER LETTER

H230004021873

TO: Registration Section
Division of Corporations

SUBJECT: BAGUALES LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fees are submitted for filing.

Please return all correspondence concerning this matter to the following:

JESUS LEON

Name of Person

SACONSA GROUP LLC

Firm/Company

3625 NW 82 Avenue Suite 100-K

Address

DORAL, FL 33166

City/State and Zip Code

JESUSLEONTERAN@GMAIL.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JESUS LEON

786 7572436

Name of Person

at ()

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

H230004021873

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

H230004021873

BAGUALES 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 01/12/2021 and assigned Florida document number L21000028531.

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:

9749 Amber Chestnut Way

(Principal office address MUST BE A STREET ADDRESS)

Winter Garden FL 34787-4572

Enter new mailing address, if applicable:

9749 Amber Chestnut Way

(Mailing address MAY BE A POST OFFICE BOX)

Winter Garden FL 34787-4572

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

City, Florida 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:

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MGR = Manager
 AMBR = Authorized Member

| <u>Title</u> | <u>Name</u> | <u>Address</u> | <u>Type of Action</u> |
|--------------|----------------------------|-----------------------------|--|
| MGRM | TRAVIESO, ISABELA | 9749 Amber Chestnut Way | <input type="checkbox"/> Add |
| | | Winter Garden FL 34787-4572 | <input checked="" type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Change |
| MGRM | MORENO, JUAN B | 9749 Amber Chestnut Way | <input type="checkbox"/> Add |
| | | Winter Garden FL 34787-4572 | <input checked="" type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Change |
| MGRM | MONTAÑO SUAREZ, JAVIER E | 9749 Amber Chestnut Way | <input checked="" type="checkbox"/> Add |
| | | Winter Garden FL 34787-4572 | <input type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Change |
| MGRM | Falcon Lairet. FRANCISCO J | 9749 Amber Chestnut Way | <input checked="" type="checkbox"/> Add |
| | | Winter Garden FL 34787-4572 | <input type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Change |
| MGRM | MORENO DEL VALLE, JAVIER | 9749 Amber Chestnut Way | <input checked="" type="checkbox"/> Add |
| | | Winter Garden FL 34787-4572 | <input type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Change |
| | MORENO DEL VALLE, JAVIEF | | <input type="checkbox"/> Add |
| | | | <input type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Change |

