L07000039361

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
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PICK-UP WAIT	ИAIL			
(Business Entity Name)				
(Document Number)				
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DIVISION OF CORPORATION

T. HAMPTON

MAY - 6 2008

EXAMINER

COVER LETTER

TO: Registration S Division of Co	Section ' orporations		
SUBJECT: LA NO	TA RESTAURANT LLC		
		nited Liability Company)	
The enclosed Articles of	of Amendment and fee(s) are su	bmitted for filing.	
Please return all corresp	oondence concerning this matte	er to the following:	
	F	PEDRO L PUENTES	
		(Name of Person)	
		(Firm/Company)	
		6351 SW 43 ST	
		(Address)	
		MIAMI FL 33155	
		(City/State and Zip Code)	
For further information	concerning this matter, please	call:	
PEDRO L PUENT		at (305) 661-9383	
(Name	e 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/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

DIVISION OF CORPORATIONS

OB MAY -5 PH 4: 35

	RESTAURANT LLC	5
(<u>Name of the Limited Liat</u> (A Flor	pility Company as it now appears on ida Limited Liability Company)	our records.)
The Articles of Organization for this Limited Liabili	ty Company were filed on APRIL	12 2007 and assigned
Florida document number <u>L07000039361</u>		
This amendment is submitted to amend the following	g:	
A. If amending name, enter the new name of the	limited liability company here:	
The new name must be distinguishable and end with the "L.L.C."	words "Limited Liability Company,"	the designation "LLC" or the abbreviation
B. If amending the registered agent and/or registered agent and/or the new registered office		records, <u>enter the name of the new</u>
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 608, 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 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 <u>Title</u> <u>Name</u> **Address Type of Action** MGR_ **ELISA GARCIA** 2830 SW 22 AVE MIAMI FL 33133 Add Remove MGR PEDRO L PUENTES 6351 SW 43 ST MIAMI FL 33155 ✓ Add ☐ Remove Add Remove □Add Remove Add Remove Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) 08 MAY -5 Dated MAY 1 2008 Signature of a member or authorized representative of a member LOPEZ PRESIDENT MANAGER

Page 2 of 2

Typed or printed name of signee

Filing Fee: \$25.00