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(Re	questor's Name)	<u> </u>
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(Cit	ty/State/Zip/Phone	<del>: #)</del>
(Requestor's Name)  (Address)  (Address)  (City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)  (Document Number)  Certified Copies Certificates of Status  Special Instructions to Filing Officer:		
(Bu	ısiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
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## **COVER LETTER**

то:	Registration Sec Division of Corp			
eum I		CIAS RANCH & CAFETERIA	LLC	
SUBJ	ECT:	Name of Limi	ited Liability Company	
The e	nclosed Articles of A	Amendment and fee(s) are sub-	mitted for filing.	
Please	e return all correspoi	ndence concerning this matter	to the following:	
		DAILYN MADRIGAL		
			Name of Person	<del></del>
			Firm/Company	<del></del>
		21870 PALM BEACH BL	VD	
			Address	<del></del>
		ALVA, FL 33920		
			City/State and Zip Code	
		E-mail address: (	to be used for future annual report notific	eation)
For fu	irther information co	oncerning this matter, please ca	all:	
DAIL	LYN MADRIGAL		305 394-7105	
	Name of	'Person	Area Code Daytime	Felephone Number
Enclo	sed is a check for th	e following amount:		
<b>₽</b> \$3	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

TO:

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

LAS DELICIAS RANCH & CAFETERIA LLC	i a a a a a a a a a a a a a a a a a a a	
(Name of the Limited Elability C (A Florida Lin	ompany as it now appears on our records.) ited Liability Company)	
The Articles of Organization for this Limited Liability Completion of Complete Compl	pany were filed on	and assigned
Florida document number		
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 t	he abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRES	<u>'S)</u>	
Enter new mailing address, if applicable:		···i
(Mailing address MAY BE A POST OFFICE BOX)	21870 PALM BEACH BLVD	<u> </u>
	ALVA, FL 33920	
		SSE TO
B. If amending the registered agent and/or registered		iter the name of the ne
registered agent and/or the new registered office address	s nere:	<b>- - -</b>
		STAIF STAIF
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 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:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	ALINA NAPOLES	21870 PALM BEACH BLVD	<b>⊒</b> Add
		ALVA, FL 33920	□ Remove
			☐ Change
MGR	DAILYN MADRIGAL	21870 PALM BEACH BLVD	
		ALVA, FL 33920	□ Remove
			Change
<del></del>			Add
			Remove  AUR Remove  AUR Change  Change  Change  STAID  Remove
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reco The 9	rd specifies a delaye Oth day after the rec	d effective d cord is filed.	ate, but n	ot an effec	tive time, a	at 12:01 a.m	n. on the e	arlier (
	JULY, 21th		2015	·				
ated			( )					
ated		Signature of a g	N		··			

Page 3 of 3

Filing Fee: \$25.00