

L15000059228

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

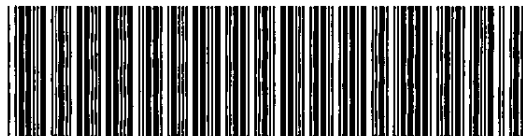
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DEC 29 2015

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Solorzano's Late Night Pizzeria 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:

Philip Solorzano
Name of Person

Solorzano's Late Night Pizzeria LLC
Firm/Company

6670 SUPERIOR AVE.
Address

SARASOTA, FL. 34231-5838
City/State and Zip Code

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

For further information concerning this matter, please call:

Philip Solorzano at (941) 924 5806
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)

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

Solorzano's Late Night Pizzeria 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 04/03/2015 and assigned
Florida document number L15000059288.

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) _____

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

_____, 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

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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>
MGR	Solorzano, Franca	4024 Kingston Terrace	<input checked="" type="checkbox"/> Add
		Sarasota, Fl. 34238	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Change

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TALLAHASSEE, FLORIDA

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Detail by Entity Name	
<u>Florida Limited Liability Company</u>	
SOLORZANOS LATE NIGHT PIZZERIA LLC	
<u>Filing Information</u>	
Document Number	L15000059228
FE/EIN Number	NONE
Date Filed	04/03/2015
Effective Date	05/01/2015
State	FL
Status	ACTIVE
<u>Principal Address</u>	
6670 SUPERIOR AVE SARASOTA, FL 34231	
<u>Mailing Address</u>	
6670 SUPERIOR AVE SARASOTA, FL 34231	
<u>Registered Agent Name & Address</u>	
SOLORZANO, PHILIP 6670 SUPERIOR AVE SARASOTA, FL 34231-342	
<u>Authorized Person(s) Detail</u>	
Name & Address	
Title MGR	
SOLORZANO, PHILIP 6670 SUPERIOR AVE SARASOTA, FL 34231	
<u>Annual Reports</u>	
No Annual Reports Filed	
<u>Document Images</u>	
04/03/2015 -- Florida Limited Liability	
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