

122000027447

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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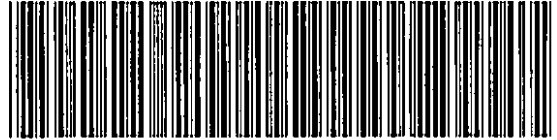
(Business Entity Name)

(Document Number)

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2022 FEB 28 AM 9:28

SECRETARY OF STATE
TALLAHASSEE, FL

3/1/2022

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: CAMPESINO FLORIDA CITY, 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:

Marlene Leon-Rubido, Esq.

Name of Person

Firm/Company

1313 Ponce De Leon Blvd. Suite 200

Address

Coral Gables, Florida 33134

City/State and Zip Code

jp@jeanpaulcastellanos.com

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

For further information concerning this matter, please call:

Marlene Leon Rubido Esq.

305 596-2211
at ()

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 Address:

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

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

FILED

2022 FEB 28 AM 9:28

CAMPESINO FLORIDA CITY, LLC.

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

SECRETARY OF STATE
TALLAHASSEE, FL

The Articles of Organization for this Limited Liability Company were filed on January 25, 2022 and assigned Florida document number L22000027447.

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:

3761 SW 139 Place

(Principal office address MUST BE A STREET ADDRESS)

Miami, Florida 33175

Enter new mailing address, if applicable:

3761 SW 139 Place

(Mailing address MAY BE A POST OFFICE BOX)

Miami, Florida 33175

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:

Jean Paul Castellanos

New Registered Office Address:

3761 SW 139 Place

Enter Florida street address

Miami,

City

Florida 33175

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.

DocuSigned by:

Jean Paul Castellanos

FA714AC4587646D...

X

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>
MGR	Mario Castellanos	14850 SW 26 Street #210	<input type="checkbox"/> Add
		Miami, Florida 33185	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Mario Castellanos	14850 SW 26 Street #210	<input type="checkbox"/> Add
		Miami, Florida 33185	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Jean Paul Castellanos	3761 SW 139 Place	<input checked="" type="checkbox"/> Add
		Miami, Florida 33175	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Jean Paul Castellanos	3761 SW 139 Place	<input checked="" type="checkbox"/> Add
		Miami, Florida 33175	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Isnel Luis	3761 SW 139 Place	<input checked="" type="checkbox"/> Add
		Miami, Florida 33175	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Isnel Luis	3761 SW 139 Place	<input checked="" type="checkbox"/> Add
		Miami, Florida 33175	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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	Ramon Castellanos	3761 SW 139 Place	<input type="checkbox"/> Add
		Miami, Florida 33175	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
AMBR	Ramon Castellanos	3761 SW 139 Place	<input type="checkbox"/> Add
		Miami, Florida 33175	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
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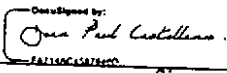
D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

E. Effective date, if other than the date of filing: _____ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated Feb 23, 2022.

Signature of a member or authorized representative of a member

Jean Paul Castellanos, Manager

Typed or printed name of signee

Filing Fee: \$25.00