

L000000015380

(Requestor's Name)

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PICK-UP  WAIT  MAIL

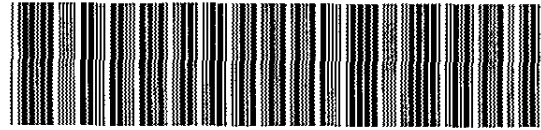
(Business Entity Name)

(Document Number)

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**LAZARUS CORPORATE FILING SERVICE**

**3320 S.W. 87 AVENUE**

**MIAMI, FLORIDA (305)552-5973**

**TERESA ROMAN ( TALLAHASSEE REPRESENTATIVE)**

OFFICE USE ONLY

**CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):**

- 1. EL TROPICO LLC.  
(Corporation Name) (Document #)
- 2. \_\_\_\_\_  
(Corporation Name) (Document #)
- 3. \_\_\_\_\_  
(Corporation Name) (Document #)
- 4. \_\_\_\_\_  
(Corporation Name) (Document #)

- Walk in  Pick up time 2.00  Certified Copy
- Mail out  Will wait  Photocopy  Certificate of Status

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input checked="" type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

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Examiner's Initials	
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CERTIFICATE OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF

EI TROPICO LLC.

(Present Name)  
(A Florida Limited Liability Company)

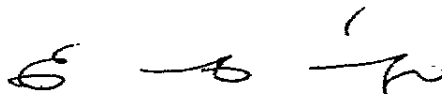
FIRST: The date of filing of the articles of organization was DEC. 12, 2000.

SECOND: The following amendment(s) to the articles of organization was/were adopted by the limited liability company:

ADD: KARIN CHACOUR — MANAGER.  
8391 NW 12th ST  
MIAMI, FL. 33126

DELETE: EDUARDO GUTIERREZ AS MANAGER

Dated Feb. 7<sup>th</sup>, 2003



Signature of a member or authorized representative of a member

EDUARDO GUTIERREZ

Typed or printed name of signee

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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