L01000015138

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

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2017 NOV 20 P 4:11
TALLAHASSEE, FLORIDA

NOV

FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 8, 2017

EDUARDO SANCHEZ
PO BOX 22566
HIALEAH, FL 33002

SUBJECT: EQUITAUR ENTERPRISES, LLC
Ref. Number: L01000015138

We have received your document for EQUITAUR ENTERPRISES, LLC and your check(s) totaling $30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Document number and name listed on application doesn't match sunbiz.org records.

A post office box is not an acceptable address for the registered agent.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Dionne M Pijeaux
Regulatory Specialist

Letter Number: 917A00022639

FILED
2017 NOV 20 P 12:11

2017 NOV 20 PM 2:41

COVER LETTER

TO: **Registration Section**
Division of Corporations

SUBJECT: Sarkano, 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:

Eduardo Sanchez
Name of Person

Sarkano
Firm/Company

6720 west 2nd cort apt 308
Address

Hialeah, Fl 33012
City/State and Zip Code

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

For further information concerning this matter, please call:

Eduardo Sanchez at (786) 708-6050
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

Equitaur Enterprises,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 9/05/2001 and assigned Florida document number L01000015138.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

Sarkano, LLC

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)

6720 West 2nd Cort Hialeah, Fl 33012
Apt. 308

Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

P.O Box 22566 Hialeah, Fl 33002

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: Eduardo Sanchez

New Registered Office Address: 6720 West 2nd Cort Apt.308
Enter Florida street address

Hialeah, **Florida** 33012
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

Title	Name	Address	Type of Action
MGR	Yaimara Perez	6720 West 2nd Cort Apt. 308	☒ Add
		Hialeah, Fl 33012	☐ Remove
			☐ Change
MGR	Jorge Joya	1835 N.E Miami Gardens Drive	☐ Add
		#296 North Miami Beach, Fl 33179	☒ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change

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: 11/21/2017 **(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 11/21/2017 . 12:00 PM

Signature of a member or authorized representative of a member

Eduardo Sanchez

Typed or printed name of signee

Filing Fee: $25.00