

LD6000093729

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

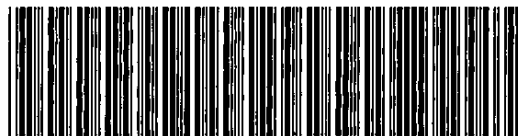
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: GABRIEL CABALLERO, P.L.
(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:

Gabriel Caballero

(Name of Person)

Gabriel Caballero, P.L.

(Firm/Company)

6406 S.W. 10 Terrace

(Address)

West Miami, Florida 33144

(City/State and Zip Code)

For further information concerning this matter, please call:

Gabriel Caballero, Esq.

(Name of Person)

at (**305**) **495-3528**

(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**

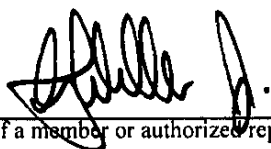
(Present Name)
(A Florida Limited Liability Company)

FIRST: The Articles of Organization were filed on September 25, 2006 and assigned document number L06000093729.

SECOND: This amendment is submitted to amend the following:

Please see attached.

Dated August 2, 2007.



Signature of a member or authorized representative of a member

Gabriel Caballero

Typed or printed name of signee

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

Filing Fee: \$25.00

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF
GABRIEL CABALLERO, P.L.**

Article II, IV, and V of the Articles of Organization are hereby deleted in their entirety and substituted with the following:

**ARTICLE II
ADDRESS**

The mailing address and street address of the principal office of the Limited Liability Company is:

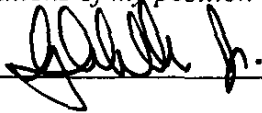
6406 S.W. 10 Terrace
West Miami, Florida 33144

**ARTICLE IV
REGISTERED AGENT, REGISTERED OFFICE, &
REGISTERED AGENT'S SIGNATURE**

The name and the Florida street address of the registered agent are:

Gabriel Caballero
6406 S.W. 10 Terrace
West Miami, Florida 33144

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 relating 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 608, F.S.



**ARTICLE V
MANAGER(S) OR MANAGING MEMBER(S)**

The name and address of each Manager or Managing Member is as follows:

Title: Manager
Gabriel Caballero
6406 S.W. 10 Terrace
West Miami, Florida 33144

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