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J. BRYAN
NOV 1 2 2008
EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: LISTO EL POLLO, FORASTERO RESTAURANT AND LOUNGE, 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:

	MORENO, SANDRA		_ 1		
			08-HOV 10		
	LISTO EL POLLO, FORASTERO RESTAURANT AND LOUNGE, LLC				
		· · · · · · · · · · · · · · · · · · ·	0 9		
	2145 E. IRLO BRONSON MEMORIAL HWY KISSIMMEE FL 34744 US			PM 2: 55	
		(Address)		25	
	KISSIMMEE FL 34744 US				
(City/State and Zip Code)					
	concerning this matter, please o				
MORENO, SANDRA (Name of Person)		at (407) 860-8083 (Area Code & Daytime	Telephone Number		
•		(ea code a Sayame	receptione runneery		
Enclosed is a check for t	ne 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 end		

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



LISTO EL POLLO, FORASTERO RESTAURANT AND LOUNGE, LL.C

(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 <u>02/2 1/2007</u>	and assigned
Florida document number L07000019491	·	
This amendment is submitted to amend the following:	•	
A. If amending name, enter the new name of the li	mited liability company here:	
The new name must be distinguishable and end with the v "L.L.C."	vords "Limited Liability Company," the designa	tion "LLC" or the abbreviation
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET AD)	DRESS)	
·		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or reg		nter the name of the new
	- "	
Name of New Registered Agent:		
New Registered Office Address:		
	(Enter Florida stre	eet address) ·
		da(Zip Code)
	(Cuy)	(Lip 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 608, 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 amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

MGRM = M	lanaging Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM'	SANDRA MORENO	2145 E. IRLO BRONSON MEMORIAL HWY KISSIMMEE FL 34744 US	Add Remove
			Add Remove
			Add Remove
			Add Remove
			Add Remove
			Add Remove
D. If amend	ling any other information, enter	change(s) here: (Attach additional sheets, if necessary.)	
			DRIVE FILED FIATE OF CORPORATION OF
Dated Nover	mber 6th	2008	5
	Saw	/ Menno	
	/	nember of authorized representative of a member	
,	SANDRA MÓRE	NO, Typed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00