L07000055949

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SECRETARY OF STATE OTVISION OF CORPORATIONS

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COVER LETTER

Division of Corporations
SUBJECT: Central Espanol Acquisition LLC (Name of Limited Liability Company)
(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:
Contreras, Jonasz & Camacho (Firm/Company)
(Firm/Company)
141 Almeria Avenue
(Address)
Coral Gables, FL 33134 (City/State and Zip Code)
For further information concerning this matter, please call:
Gilbert Contreras at (786) 594-0180 (Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$25.00 Filing Fee Certificate of Status Certificate of Status Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

TO:

Registration Section

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

Central Espanol Acquisition LLC

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

(A Florida Limited Liability Company)

(<u>Name of the Limited Liabilit</u> (A Florida	y Company as it now appears on ou Limited Liability Company)	r records.
The Articles of Organization for this Limited Liability (Florida document number <u>L07000055949</u>	Company were filed on <u>May</u>	1 25, 2007 and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lim	nited liability company here:	
The new name must be distinguishable and end with the wo'L.L.C."	ords "Limited Liability Company," the	e designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADD	RESS)	
		80 FAIG
		JUL 86
Enter new mailing address, if applicable:		- LETA
(Mailing address MAY BE A POST OFFICE BOX)		7 P
		FOR H
	•	: II
B. If amending the registered agent and/or registered agent and/or the new registered office add		cords, enter the name of the new
egistered agent and/or the new registered office add	<u>ii ess dere</u> :	
Name of New Registered Agent:		
New Registered Office Address:		
	(Enter Flo	orida street address)
		_, Florida
	(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 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 Changing Registered Agent, Signature of New Registered Agent)

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 = Managing Member **Title** Name <u>Address</u> **Type of Action** Remove Remove □ Add ☐ Remove Add ☐ Remove ┌ Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) *608* Signature of A Nember or authorized representative of a member Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00