1070000 60311

Alexandra Huffman
1702 SW ARC MOVE St (Address)
PW+S+, Lucy 134953 (City/State/Zip/Phorle #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
760 200
184 707 671
Office Use Only



400116301974

02/04/08--01031--010 **35.00

JEFEB 22 AM 9: 25 SECRETARY OF STATE SECRETARY OF STATE

COVER LETTER

Division of Corporations
SUBJECT: Solde Mexico Mexicon Restaurant, 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:
LUIS ESCOBOL CPA PA (Name of Person)
CBS Financial Accounting, LLC. (Firm/Company)
6209 W. Connercial Blvd. Suite 7
Tomarac FL 33319. (City/State and Zip Code)
\$025a ' '
For further information concerning this matter, please call: Veronica Suarez at 954,724,4141 (Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\ \text{S25.00 Filing Fee & Certificate of Status} \text{ \$\ \text{Certified Copy (additional copy is enclosed)} }\ \text{ \$\ \text{Certified Copy (additional copy is enclosed)} }\ \text{ \$\ \text{Certified Copy (additional copy is enclosed)} }\ \text{ \$\ \text{Certified Copy (additional copy is enclosed)} }\ \text{ \$\ \text{Certified Copy (additional copy is enclosed)} }\ \text{ \$\ \text{Certified Copy (additional copy is enclosed)} }\ \end{array}\ \text{ \$\ \text{Certified Copy (additional copy is enclosed)} }\ \end{array}\ \text{ \$\ \text{Certified Copy (additional copy is enclosed)} }\ \end{array}\ \text{ \$\ \text{Certified Copy (additional copy is enclosed)} }\ \end{array}\ \text{ \$\ \text{Certified Copy (additional copy is enclosed)} }\ \end{array}\ \text{ \$\ \text{Certified Copy (additional copy is enclosed)} }\ \end{array}\ \text{ \$\ \text{Certified Copy (additional copy is enclosed)} }\ \end{array}\ \text{ \$\ \text{Certified Copy (additional copy is enclosed)} }\ \end{array}\ \text{ \$\ \text{Certified Copy (additional copy is enclosed)} }\ \text{ \$\ \text{Certified Copy (additional copy is enclosed)} }\ \end{array}\ \text{ \$\ \text{Certified Copy (additional copy is enclosed)} }\ \end{array}\ \text{ \$\ \text{Certified Copy (additional copy is enclosed)} }\ \end{array}\ \text{ \$\ \text{Certified Copy (additional copy is enclosed)} }\ \end{array}\ \text{ \$\ \text{Certified Copy (additional copy is enclosed)} \ \end{array}\ \text{ \$\ \text{Certified Copy (additional copy is enclosed)} \ \end{array}\ \text{ \$\ \text{Certified Copy (additional copy is enclosed)} \ \end{array}\ \text{ \$\ \text{Certified Copy (additional copy is enclosed)} \ \end{array}\ \text{ \$\ \text{Certified Copy (additional copy is enclosed)} \ \end{array}\ \text{ \$\ \text{Certified Copy (additional copy is enclosed)} \ \end{array}\ \text{ \$\ \text{Certified Copy (additional copy is enclosed)} \ \end{array}\ \text{ \$\ \text{Certified Copy (additional copy is enclosed)} \ \end{array}\ \end{array}\ \$\ \text{Certi

MAILING ADDRESS:

Registration Section

TO:

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



FLORIDA DEPARTMENT OF STATE Division of Corporations

February 7, 2008

ALEXANDRA HOFFMAN 1702 SW ARDMORE STREET PORT ST. LUCIE, FL 34953

SUBJECT: SOL DE MEXICO MEXICAN RESTAURANT LLC

Ref. Number: L07000060311

We have received your document for SOL DE MEXICO MEXICAN RESTAURANT LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

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) 245-6097.

Marsha Thomas Regulatory Specialist II

Letter Number: 108A00008118

OBFEB 22 AM 9: 25
SECRETARIE OF STATE
SECRETARISE FLOADS

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Sol de Mexico	Mexican Resta	TURCHT, LLC.
(A F	lorida Limited Liability Company)	
The Articles of Organization for this Limited Liab	bility Company were filed on 000	07 2007 and assigned
This amendment is submitted to amend the follow	ving:	
A. If amending name, enter the new name of t		
	red Space LLC	
The new name must be distinguishable and end with "L.L.C."	the words "Limited Liability Company," the	he designation "LLC" or the abbreviation
L.L.C.		7.0
B. If amending the registered agent and/or registered agent and/or the new registered office		ecords, enter the name of the new
Name of New Registered Agent:		25
New Registered Office Address:		Su.
Ten Lighter ou office Humans.	(Enter F	lorida 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** <u>Name</u> **Address Type of Action** Julio Narez 702 SW Ardmore Street Add Remove Add Remove Add D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated Tebruary

Page 2 of 2

Filing Fee: \$25.00

Typed or printed name of signee