## L08000010614

(Requestor's Name)			
(Address)			
(Address)			
(Audiess)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
· , ,			
(Decree and Name Is a )			
(Document Number)			
•			
Certified Copies Certificates of Status			
·			
Charles Instructions to Filips Office			
Special Instructions to Filing Officer:			





200118102962

02/15/08--01011--012 \*\*25.00

08 FEB 15 AM 10: 47
SECRETARY OF STATE
SHAHASSEE FLORIDA

## **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: GVUPO TOSCA LLC (Name of Limited Liability Company)
The enclosed member, managing member or manager resignation and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to:
Lisa Lanza Esq.
Usette Pre Salgzar PA
200 (Firm/Company)  Crowder Blad. Suite 311  (Address)
Ley Biscarn FC 33149 (City/State and Zip Code)
For further information concerning this matter, please call:
(Name of Contact Person) at (305) 361-616/ (Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to the Florida Department of State for: \$25 Filing Fee \$ Certified Copy
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building P.O. Box 6327 Tallahassee, Florida, 32314

CR2E079 (5/06)

Tallahassee, Florida 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

08 FEB 15 AM IO: 47
SECRETARY OF STATE
TALLAHASSEE FLORIDA

	01	CALCANASSEE FLORI
Grupo	Tosa LLC	
(Name of the Limited Lia	bility Company as it now appears on corida Limited Liability Company)	our records.)
(A Flo		•
The Articles of Organization for this Limited Liabi	,	30 2008 and assigned
Florida document number 108000	10614	'
This amendment is submitted to amend the following	na:	
This affeitement is subfitted to affeite the following	ug.	
A. If amending name, enter the new name of the	e limited liability company here:	
$A \setminus G$		
The new name must be distinguishable and end with the "L.L.C."	e words "Limited Liability Company," t	he designation "LLC" or the abbreviation
B. If amending the registered agent and/or	registered office address on our r	ecords, enter the name of the new
registered agent and/or the new registered office	e address here:	ecology enter the name of the new
•		
	1 -	
Name of New Registered Agent:	N19	
New Registered Office Address		•
New Registered Office Address.	New Registered Office Address: (Enter Florida street addr	
		Florida
-	(City)	, Florida(Zip Code)
New Registered Agent's Signature, if changing Regi	istered Agent:	
I haraby accent the appointment as registered a	gent and agree to act in this capaci	ty I further garee to comply with
I hereby accept the appointment as registered at the provisions of all statutes relative to the prop		
the provisions of all statutes relative to the propaccept the obligations of my position as register	per and complete performance of my red agent as provided for in Chapte.	duties, and I am familiar with and 608, F.S. Or, if this document is
the provisions of all statutes relative to the propaccept the obligations of my position as register being filed to merely reflect a change in the register.	oer and complete performance of my red agent as provided for in Chapte istered office address, I hereby conj	duties, and I am familiar with and 608, F.S. Or, if this document is
the provisions of all statutes relative to the propaccept the obligations of my position as register	oer and complete performance of my red agent as provided for in Chapte istered office address, I hereby conj inge	duties, and I am familiar with and r 608, F.S. Or, if this document is firm that the limited liability
the provisions of all statutes relative to the propaccept the obligations of my position as register being filed to merely reflect a change in the register.	oer and complete performance of my red agent as provided for in Chapte istered office address, I hereby conj inge	duties, and I am familiar with and 608, F.S. Or, if this document is

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	anaging Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	Jose Sonchoz	353 SE 2nd St. Miami, FL 33131	Add Remove
MGRM	Blanca Valencia	353 SE ZN St. Miam, FC 33/3/	Add Remove
	•		Add Remove
			Add Remove
<del> </del>			Add Remove
			Add Remove
D. If amend	ing any other information, enter chang	e(s) here: (Attach additional sheets, if necessary	<i>)</i>
			· 
_			08 FEB
Dated 2	14/08 Julian Signature of a member	or authorized representative of a member	EB 15 AN IO: 47 AHASSEE FLORIDA
	Typed	or printed name of signee	D

Page 2 of 2

Filing Fee: \$25.00