L09000023686

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S. HAWKES

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EXAMINER

GOVER LETTER

Division of Corporations					
SUBJECT: D' PAPAYA RESTAURANT & BAR LLC					
		ited Liability Company)			
The enclosed Articles of Amendment and fee(s) are submitted for filing.					
Please return all correspondence concerning this matter to the following:					
•	-				
	HECTOR CRUZ, CPA				
	THE TOTAL OR OLD TOTAL	(Name of Person)			
	400011111100001755	SECTIONAL I DUONICO MEO			
	ACCOUNTING CENTER	(Firm/Company)			
		(I marcompany)			
	5701 DOGWOOD DR				
		(Address)			
	ORLANDO FL 32807				
		(City/State and Zip Code)	····		
For further information concerning this matter, please call:					
EDOAD A OUACON		407 . 201 4440	•		
EDGAR A CHACON at (407) 281-4448 (Name of Person) (Area Code & Daytime Telephone Nur		elephone Number)			
·					
Enclosed is a check for the	a following amount:				
	_	Flore on Pill P. A	□#<0.00 pii! p		
□ \$25.00 Filing Fee	☐\$30.00 Filing Fee & Certificate of Status	□\$55.00 Filing Fee & Certified Copy	□\$60.00 Filing Fee, Certificate of Status &		
		(additional copy is enclosed)	Certified Copy (additional copy is enclosed)		
			1,		

TO:

Registration Section

MAILING ADDRESS: Registration Section Division of Corporations .P.O. Box 6327 . Tallahassee, FL 32314

A * , **4 *

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

D' PAPAYA RESTAURANT & BAR, LLC

(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 Liab	oility Company were filed on 03/10/2009	and assigned
Florida document number L09000023686		The same
This amendment is submitted to amend the follow	ana:	16 - 18 - 18 - 18 - 18 - 18 - 18 - 18 -
This affendment is submitted to affend the follow	ing.	
A. If amending name, enter the new name of the	ne limited liability company here:	
TESORO LATINO RESTAURANT & BAR, LLC		
The new name must be distinguishable and end with t "L.L.C."	the words "Limited Liability Company," the des	signation "LLC" or the abbreviation
Enter new principal offices address, if applicab	ele:	,
(Principal office address MUST BE A STREET.	ADDRESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BO	2X)	
(Muning dualess MATI BEAT OST OFFICE De		
B. If amending the registered agent and/or registered agent and/or the new registered office		ls, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
(Enter Florida street address)		
	-	2) ()
	, F	Plorida(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 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 **Address** Type of Action <u>Title</u> <u>Name</u> MGR **DORIS CHACON ₽** 🗸 Add 3212 HOLLAND DRIVE Remove ORLANDO FL 32825 Add Remove Remove __ Add Remove ┌ Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated MARCH 23 Signature of a member or authorized representative of a member **EDGAR A CHACON**

Typed or printed name of signee
Page 2 of 2

Filing Fee: \$25.00