

**L09000073813**

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(Requestor's Name)

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(Address)

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(Address)

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(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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2009 DEC -9 PM 11:34  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**C. LEWIS**

DEC 10 2009

**EXAMINER**

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** FACUSA, 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:

AGEL A. BARRIOS

Name of Person

FACUSA, LLC

Firm/Company

2360 WEST 68 STREET, # 102

Address

HIALEAH, FL. 33016

City/State and Zip Code

ABARRIOS1125@AOL.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ANGEL A. BARRIOS

Name of Person

at ( 786 )

586-4733

Area Code & Daytime Telephone Number

Enclosed is a check for the 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 enclosed)

**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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

December 7, 2009

AGEL A. BARRIOS  
FACUSA, LLC  
2360 W. 68 STREET, #102  
HIALEAH, FL 33016

SUBJECT: FACUSA, LLC  
Ref. Number: L09000073813

We have received your document for FACUSA, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent designated must be an active Florida entity or a foreign entity authorized to transact business in Florida. Please correct the document.

Please return the corrected original and one copy of 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) 245-6047.

Carolyn Lewis  
Regulatory Specialist II  
Registration/Qualification Section

Letter Number: 609A00037311

ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF

FILED

2009 DEC -9 PM 10:34

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FACUSA, 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 Liability Company were filed on 07/31/2009 and assigned  
Florida document number L09000073813.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

2360 WEST 68 STREET

(Principal office address MUST BE A STREET ADDRESS)

# 102

HIALEAH, FL. 33016

Enter new mailing address, if applicable:

2360 WEST 68 STREET

(Mailing address MAY BE A POST OFFICE BOX)

# 102

HIALEAH, FL. 33016

**B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:**

Name of New Registered Agent:

ROSEMARIE BACALLAO Esq.

New Registered Office Address:

814 PONCE DE LEON BOULEVARD

Enter Florida street address

CORAL GABLES

, Florida

33134

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.

[Signature]  
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

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	FRANCISCO COSTA	7101 MIAMI LAKES DRIVE, Q 17 MIAMI LAKES, FL 33014	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGR	ANGEL A. BARRIOS	14700 SW 78 AVENUE MIAMI, FL 33158	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

Dated

DECEMBER 1

2009

Signature of a member or authorized representative of a member

ROSEMARIE BACALLAO, ESQ.

Typed or printed name of signee

FILED  
2009 DEC -9 PM 12:34  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA