

LO9000119648

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



500164056025

01/04/10--01009--015 **30.00

FILED
10 JAN -4 PM 3:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

N. O. *[Signature]* JAN - 5 2010

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT:

Larry's Latin American Corp 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:

PEDRO FERNANDEZ
Name of Person

Larry's Latin American, LLC.
Firm/Company

8515 N.W. 198 Street
Address

Miami Lakes, FL 33015
City/State and Zip Code

pedrit2005@hotmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

PEDRO FERNANDEZ
Name of Person

at (305) 934-0824
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

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

FILED

10 JAN -4 PM 3:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

LANDY'S Latin American, L.L.C.

(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 12/17/2009 and assigned
Florida document number 209000119648.

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:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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:

Rodolfo M. Blanco Esq.

New Registered Office Address:

14211 Commerce Way, Suite 400

Enter Florida street address

Miami Lakes

Florida

33016

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

Title	Name	Address	Type of Action
MGR	PEDRO FERNANDEZ	8515 NW 198 STREET MIAMI LAKES, FL. 33015	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGR	Wilson Fernandez	8515 N.W. 198 STREET MIAMI LAKES, FL. 33015	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGR	LARRY'S Latin American	802 East 25th STREET Hialeah, FLA. 33103	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGR	SARA PEREZ	18772 N.W. 80 CT. MIAMI, Florida 33015	<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

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

Please change effective date from 1/4/2010 to 12/17/09.

CLERK OF STATE
TALLAHASSEE, FLORIDA

10 JAN -4 PM 3:00

FILED

Dated

12/29, 2009

Signature of a member or authorized representative of a member

Pedro Fernandez
Typed or printed name of signee