

L1000000 7695

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

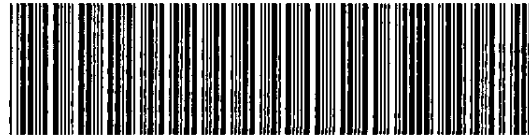
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2011 FEB -7 PM 2:29

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J. SAULSBERRY  
EXAMINER

FEB 08 2011

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: MARIQUITAS AND TOSTONES 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:

IVIS PEREZ

Name of Person

FAST DOCUMENT SERVICES

Firm/Company

2189 W 60 ST STE 204

Address

HIALEAH, FL 33016

City/State and Zip Code

fastdocumentservices@hotmail.com

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

For further information concerning this matter, please call:

IVIS PEREZ

Name of Person

at ( 305 )

698 6844

Area Code & Daytime Telephone Number

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TALLAHASSEE, FLORIDA

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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**

**MARIQUITAS AND TOSTONES 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 02/02/2011 and assigned  
Florida document number L10000007695.

This amendment is submitted to amend the following:

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

N/A

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:**

N/A

**(Principal office address MUST BE A STREET ADDRESS)**

**Enter new mailing address, if applicable:**

N/A

**(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:

SONIA D RODRIGUEZ

New Registered Office Address:

3268 SW 28 ST

*Enter Florida street address*

MIAMI

Florida

33133

*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

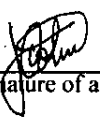
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	JORGE CORTINA	4199 W 8 AVE HIALEAH, FL 33012	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	WILLIAM A ALMARAL	8289 NW 7 ST MIAMI, FL 33126	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGR	SONIA D RODRIGUEZ	3268 SW 28 ST MIAMI, FL 33133	<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

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

N/A

Dated FEBRUARY 2, 2011

  
Signature of a member or authorized representative of a member

JORGE CORTINA

Typed or printed name of signee

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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