10000008030

(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



100166688231

01/27/10--01005--025 **25.00



B. KOHR

JAN 27 2010

EXAMINER

COVER LETTER

Registration Section Division of Corporations

TO:

SUBJECT:	EL RANCHI	TO OF QUINCY LLC	- Jay 2)	
SUBJECT:	رج			
The enclosed Articles	of Amendment and fee(s) are su	bmitted for filing.		
Please return all corre	spondence concerning this matter	r to the following:		
		RON BENFIELD		
		Name of Person		
Firm/Company				
	58 SIOUX CIRCLE Address			
HAVANA, FL 32333 City/State and Zip Code				
	E-mail address: (to be used for future annual report	notification)	
For further information	n concerning this matter, please	-		
	ON BENFIELD ue of Person	at (<u>850</u>) Area Code & Da	539-5171 Aytime Telephone Number	
Enclosed is a check for	or the following amount:			
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enci	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
Reg Div P.O	ILING ADDRESS: istration Section ision of Corporations Box 6327 ahassee, FL 32314	Registration S Division of Co Clifton Buildi	orporations ng ve Center Circle	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



EL RANCHITO OF QUINCY 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 Liabilit	y Company were filed onJANU/	ARY 22, 2010 and assigned	
Florida document numberL1000008030	<u>. </u> .		
This amendment is submitted to amend the following	3:		
A. If amending name, enter the new name of the	limited liability company here:		
The new name must be distinguishable and end with the "L.L.C."	words "Limited Liability Company," the	ne designation "LLC" or the abbreviation	
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET AL	DDRESS)		
		· ,·	
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX]		
B. If amending the registered agent and/or registered agent and/or the new registered office a		ecords, enter the name of the new	
Name of New Registered Agent:	····	·····	
New Registered Office Address:			
	Enter Florida street address		
	, Florida		
	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 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> Address **Type of Action MGRM SONIA TEJADA** 4952 GREENSBORO HWY ☐ Add ✓ Remove QUINCY, FL 32351 ☐ Add ☐ Remove ☐ Add ☐ Remove ☐ Add Remove ∏Add Remove \prod Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) **JANUARY 26** 2010 Signature of a member of authorized representative of a member **RON BENFIELD** Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00