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TALLAHASSEE, FLORIDA

2011 APR -4 AM 10:02

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J. SAULSBERRY  
EXAMINER

APR 6 2011

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT: SHOW RANCO DONDE POCHO, 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:

**FRANCISCO O. LORIGA, ESQ.**

Name of Person

**LAW OFFICE OF FRANCISCO O. LORIGA**

Firm/Company

**6482 SW 39TH STREET**

Address

**MIAMI, FLORIDA 33155**

City/State and Zip Code

**MIAMIOVI\_338@MSN.COM**

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

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TALLAHASSEE, FLORIDA

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For further information concerning this matter, please call:

**FRANCISCO O. LORIGA**

Name of Person

at ( 786 )

**380-8714**

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**

**SHOW RANCO DONDE POCHO, 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 09/09/2010 and assigned  
Florida document number L100000934443.

This amendment is submitted to amend the following:

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

**SHOW RANCH DONDE POCHO, LLC**

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)**

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TALLAHASSEE, FLORIDA

**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: CARLOS OBANDO

New Registered Office Address: 5401 NW 79 STREET

*Enter Florida street address*

DORAL, Florida 33166  
*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>
MGRM	ALFONSO OBANDO	5401 NW 79 STREET DORAL, FLORIDA 33166	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	JONATHAN S. OLAYA	5401 NW 79 STREET DORAL, FLORIDA 33166	<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)

CARLOS OBANDO AND JONATHAN S. OLAYA ARE 50/50 PERCENT  
OWNERS. BOTH MR. OBANDO AND MR. OLAYA SHALL HAVE EQUAL  
SHARES OF ALL PROFITS OR LOSSES FROM ANY AND  
ALL BUSINESS OPERATIONS OF THE LLC. CONSUELO BARRERA  
HAS NO MEMBERSHIP INTEREST IN THE LLC.

Dated MARCH 30, 2011



Signature of a member or authorized representative of a member

CARLOS OBANDO

Typed or printed name of signee

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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