

211000007498

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

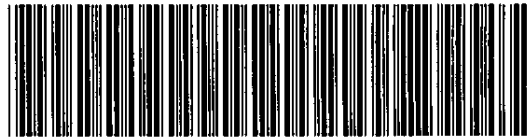
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



800258405158

04/01/14--01025--008 **25.00

FILED
14 APR - 1 PM 4:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APR 1 2014

COVER LETTER

TO: **Registration Section**
Division of Corporations

SUBJECT: TEX N MEX RTO VENTURES 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:

MARC EDELMAN
Name of Person

TEX N MEX RTO VENTURES LLC
Firm/Company

6608 ADAMO DRIVE
Address

TAMPA FL 33619
City/State and Zip Code

MARC@BUDDYRENTS.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

MARC EDELMAN at (813) 376-6335
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|---|--|--|--|
| <input type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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

TEX N MEX RTO VENTURES LLC

Page 1 of 3

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
<u>MGR</u>	<u>Terry Beville</u> ✓	<u>6608 Adamo Drive</u> <u>Tampa, FL 33619</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
<u>MGR</u>	<u>Steve Mathis</u> ✓	<u>3310 Silver Pond Drive</u> <u>Plant City, FL 33566</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
<u>MGR</u>	<u>Jim Duke</u> ✓	<u>4330 Strauss Road</u> <u>Plant City, FL 35635</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
<u>MGR</u>	<u>Joe Bob Ellis</u> ✓	<u>6709 86th Street</u> <u>Lubbock, TX 79424</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
<u>MGR</u>	<u>Darryl Franklin</u>	<u>2400 Roundup</u> <u>Hobbs, NM 88240</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
<u> </u>	<u> </u>	<u> </u>	<input type="checkbox"/> Add <input type="checkbox"/> Remove

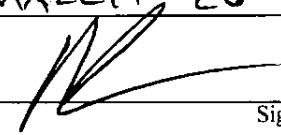
RECEIVED
14 APR - 1 PM
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

E. Effective date, if other than the date of filing: _____ (optional)

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated MARCH 26, 2014.



Signature of a member or authorized representative of a member

Marc Edelman

Typed or printed name of signee

FILED
14 APR - 1 PM 4:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA