## L110000023416

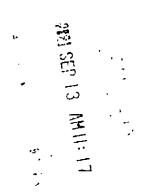
(Requestor's Name)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
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Special instructions to raining Officer.





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## **COVER LETTER**

	on of Cor	porations			
UBJECT:	A.C.R	. TRADING. LLC			
_		Name of Lin	nited Liability Company		
he enclosed A	rticles of	Amendment and fee(s) are sub	omitted for filing.		
lease return all	correspo	ndence concerning this matter	to the following:		
		ALICIA REINA MONTA	.NO		
			Name of Person		
		11462 QUAIL ROOST D	R		
			Firm/Company		· <del>-</del>
		-	Address		
		MIAMI, FL 33157			
			City/State and Zip Code		
		AMONTANO650627@Y			
or further infor	mation co	E-mail address: ( oncerning this matter, please c	to be used for future annual all:	report notification)	<del></del>
CARLOS A. CA			786 23	34-1065	
<u>-</u>	Name of	Person	at () Area Code	Daytime Teleph	one Number
inclosed is a ch	eck for th	e following amount:			
<b>■ \$25.00</b> Filin	ng Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee Certified Copy todditional copy is en		\$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed
	Address		Street A		,
_	ration S on of Co	ection orporations	_	ration Section on of Corporatio	ens .
	30x 632		The Ce	ntre of Tallaha:	ssee
Tallah	assee, F	TL 32314	2415 N	l. Monroe Stree	t, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

A.C.R. TRADING, 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 02/22/2011 \_\_\_\_ and assigned Florida document number L11000023416 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: LA REINA DE PERICO, LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." N/A Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) N/A 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: ALICIA REINA MONTANO Name of New Registered Agent: 111462 QUAIL ROOST DR New Registered Office Address: Enter Florida street address , Florida 33157 Zip Code MIAMI

## 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 605, 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.

City

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR =	Manager	
AMBR =	Authorized	${\bf Member}$

<u>Title</u>	<u>Name</u>	Address	Type of Action
		N/A	□Add
			Remove
			□ Change
			□Remove
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ctive date, if other than the date of filing:	(optional) date of filing or more than 90 days after filing.) Pursuant to 605. e statutory filing requirements, this date will not be liste
effective date is listed, the date must be specific and cannot be prior to deg. If the date inserted in this block does not meet the applicable	
effective date is listed, the date must be specific and cannot be prior to de:  If the date inserted in this block does not meet the applicable ament's effective date on the Department of State's records.  Ford specifies a delayed effective date, but not an effective time,	, at 12:01 a.m. on the earlier of: (b) The 90th day after
effective date is listed, the date must be specific and cannot be prior to defective date inserted in this block does not meet the applicable ament's effective date on the Department of State's records.  Food specifies a delayed effective date, but not an effective time, filed.	, at 12:01 a.m. on the earlier of: (b) The 90th day after /
effective date is listed, the date must be specific and cannot be prior to defect of the date inserted in this block does not meet the applicable ument's effective date on the Department of State's records.  cord specifies a delayed effective date, but not an effective time, a filed.	] ANO

Filing Fee: \$25.00