

L11000037578

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

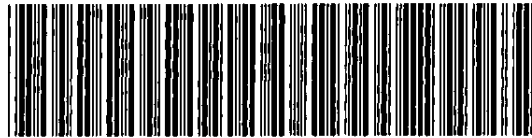
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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L11-37578

Amendment NC

No Charge

11 OCT 25 PM 1:34  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

N. CAUSSEAU

OCT 26 2011

EXAMINER



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

October 6, 2011

ORGULLO LATINO LLC  
C/O JIM GAY  
3984 EAST SR 64  
BRADENTON, FL 34208

SUBJECT: ORGULLO LATINO LLC (THIS IS OUR 2ND REQUEST PLEASE  
SEND THE AMENDMENT WITHIN 30 DAYS)  
Ref. Number: L11000037578

This is to advise you that on March 29, 2011, we filed your limited liability company under the above name, which was not available.

Therefore, we request that you file an amendment, at no charge, to change the name of your limited liability company to make it distinguishable from the existing entity. We have enclosed forms and guidelines for your assistance.

We apologize for this inconvenience and trust that you understand the urgency in completing this amendment, and returning it along with a copy of this letter to my attention as soon as possible.

If you have any questions, please call (850) 245-6918.

Sincerely,

Nanette Causseaux  
Document Specialist Supervisor  
Registration/Qualification Section

Letter Number: 011A00016984

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Orgullo Latino 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:

Emily Martinez  
Name of Person

\_\_\_\_\_  
Firm/Company

945 25th DE Suite 1  
Address

Ellenton, FL 34222  
City, State and Zip Code

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

For further information concerning this matter, please call:

Emily Martinez at 941, 296 5042  
Name of Person 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

FILED  
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Orgullo Latino 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 3/29/11  
Florida document number L71000037578

This amendment is submitted to amend the following:

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

Orgullo Latino Tax and Notary 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)

945 25th DR E suite 7  
ELLENTON, FL 34222

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

945 25th DR E suite 7  
ELLENTON, FL 34222

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:

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 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>
_____	_____	_____	<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
_____	_____	_____	<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.)*

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Dated Oct 20 2011

  
Signature of a member or authorized representative of a member

Emily Mackay  
Typed or printed name of signee

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TALLAHASSEE, FLORIDA