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COVER LETTER

Division of Corporations
SUBJECT: Senor Frogs Orlando, 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:
NICOLAS CAMENA Name of Person
Senor Frags Orlando LLC
8747 International Dr #103
Orlando, FL 32819 City/State and Zip Code Crystal @ Frogsoriando. Com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Chistan Stan at (407) 351-2525 ext 133
Enclosed is a check for the following amount: Second Filing Fee Second Filing Fee & Certificate of Status Second Filing Fee & Certificate of Status Second Filing Fee & Certificate of Status

MAILING ADDRESS:

TO:

Registration Section

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

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Sphar Fr	2007	Oria	ndO.	UC		LONIO,
(Name of the Limited	Liability Com	apany as it now	appears on ou	r records.)		
					1	
The Articles of Organization for this Limited Liab	oility Compa	ny were filed	on <u>UD/ 3</u>	<u> </u>	and a	ssigned
Florida document number <u>L1100038</u>	352					
This amendment is submitted to amend the follow	ving:					
A. If amending name, enter the new name of t	he limited li	iability comp	any here:			
				ut t c''	- hhamistion'	
The new name must be distinguishable and contain the wor	ds "Limited Li	iability Compan	y," the designat	on "ELC" or the	e appreviation	L.L.C.
Enter new principal offices address, if applical	ble:	·. ——-		 -		
(Principal office address MUST BE A STREET	ADDRESS)	<u> </u>				
		_ 				
Enter new mailing address, if applicable:						 _
(Mailing address MAY BE A POST OFFICE B	<u>(OX)</u>					
				<u>.</u>		
B. If amending the registered agent and/o	r registered	d office add	ress on our	records, ent	ter the nan	ne of the new
B. If amending the registered agent and/or registered agent and/or the new registered off	ice address	here:				
	N	10010	\mathcal{C}	mour	7	
Name of New Registered Agent:	17	10010	<u>s u</u>		<u> </u>	
New Registered Office Address:	874	rt Int	Enter Florida sti	1000 eet address	Dr #	103_
	<u> Or</u>	lanc	10	, Florida	328 Zip Cd	S O
		Ciù			- 2.	

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 control that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Menature of New Registered Agent

Page 1 of 3

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 Member

<u>Title</u>	Name	Address	Type of Action
MGR	Nicolas Caneva	4741 N. Saint Bride	_Cır. ≥_X[Add
		Orlando FL 32812	
			Change
			Remove OChange OV -5 Remove Remove
			Change
			🗆 Add
			□ Remove
			Change
			□ Add
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. 11 amei –	nding any other information, enter change(s) here: (Attach additional sheets, if necessary.)	,
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(If an eff Note:	ive date, if other than the date of filing: 10/30/18 (optional) Rective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605 If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed the entry of the date on the Department of State's records.	.0207 (3)(b) cd as the
the red b) The	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlies 90th day after the record is filed.	er of:
Dated	October 30 . 2018	
	Signature of a member or aphibriled enterentative of a member	
	NICOLAS CANEVA Typed or printed name of signec	

Page 3 of 3

Filing Fee: \$25.00