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(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
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TO JAN II PA IN OU

B. BOSTICK

JAN 1 2 2012

EXAMINER

COVER LETTER

TO:

TO:	Registration S Division of Co				
SUBJECT: El Ranc			nito Alegre, LLC		
		Name of Lim	ited Liability Company		
The en	closed Articles o	f Amendment and fee(s) are su	bmitted for filing.		
Please	return all corresp	ondence concerning this matte	r to the following:		
		Shari Stier			
Name of Person					
			Firm/Company		
14200 SW 23 Street					
Address					
Davie, FL 33325					
			City/State and Zip Code		
		stier	companies@yahoo.cor	m	
		E-mail address: (to be used for future annual repor	t notification)	- mark
For fur	ther information	concerning this matter, please of	eall:		12 J
		Shari Stier	at (954.)	649-0998	77 - 172 H
	Name	of Person	Area Code & D	aytime Telephone Number	FT)
Enclose	ed 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 enc	losed) Certified	ing Fee. □ te of Status &
MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Registration S Division of C Clifton Buildi	orporations ing ve Center Circle		

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Nama of the Line) and	El Ranchito Alegre		
(A	Florida Limited Liability Company)	irs on our recorus.)	
e Articles of Organization for this Limited L	iability Company were filed on	june 15,2011	and assigned
orida document numberL11000069	9680		
is amendment is submitted to amend the following	owing:		
(Name of the Limited Liability Company as it now appears on our records,) (A Florida Limited Liability Company) e Articles of Organization for this Limited Liability Company were filed onjune 15,2011 and assigned			
	th the words "Limited Liability Comp	any," the designation "L	LC" or the abbrevi
ter new principal offices address, if applic	able:	>	(%
incipal office address MUST BE A STREE	T ADDRESS)	7:	
			
		; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ;	· · · · · · · · · · · · · · · · · · ·
unng dadress MAT BE A POST OFFICE	<u></u>		
			
istered agent and/or the new registered of	fice address here:	our records, <u>enter tl</u>	ne name of the
Name of New Registered Agent:	Shari Stier		
New Registered Office Address:			
	Ei	ıter Florida street addr	ess
	Davie	, Florida	33325
	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 Type of Action Title Name Address Shari Stier MGRM 14200 SW 23 Street ✓ Add Davie, FL 33325 Remove Juan C. Gomez MGR 14200 SW 23 Streret ☐ Add Remove Davie, FL 3325 ☐ Add Remove ∏Add Remove □Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Dated December 07 2011

Signature of a member or authorized representative of a member Shari Stier

Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00



FLORIDA DEPARTMENT OF STATE Division of Corporations

December 12, 2011

SHARI STIER 14200 SW 23 STREET DAVIE, FL 33325

SUBJECT: EL RANCHITO ALEGRE, LLC

Ref. Number: L11000069680

We have received your document for EL RANCHITO ALEGRE, LLC and your check(s) totaling \$55.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

The document must be signed by a member or an authorized representative of a member.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6028.

Barbara Bostick Regulatory Specialist II

Letter Number: 211A00027655