111000079311

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2017 SEP 25 PM 1: 49

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COVER LETTER

Division of Corporations TAQUERIA LATINA LLC SUBJECT: _ 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: SELMA BARAHONA Name of Person S & B QUALITY SERVICES INC Firm/Company 13805 NE 16 AVE Address MIAMEEL 33161 City/State and Zip Code CD5925@MSN.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: SELMA BARAHONA 908-2067 Name of Person Area Code Daytime Telephone Number Enclosed is a check for the following amount: ■ \$25,00 Filing Fee □ \$30.00 Filing Fee & □ \$55.00 Filing Fee & □ \$60,00 Filing Fee. Certificate of Status Certified Copy Certificate of Status & Certified Copy (additional copy is enclosed) (additional copy is enclosed)

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

2011 SEP 25 PH 1: 49

TAQUERIA LATINA ELC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

	•	, ,		(1994)
The Articles of Organization for this Limited I Florida document number L11000079311	Liability Company were fil	led on	07/08/2011	and assigned
This amendment is submitted to amend the fol	lowing:			
A. If amending name, <u>enter the new name</u>	of the limited liability cor	mpany her	<u>re</u> :	
The new name must be distinguishable and contain the	words "Limited Liability Comp	pany," the de	signation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if appli	cable: N/A			
(Principal office address MUST BE A STRE	ET ADDRESS)			
Enter new mailing address, if applicable:	D()\11		EROAD BAY 1 ACH FL 33064	
Mailing address MAY BE A POST OFFICE				
B. If amending the registered agent and registered agent and/or the new registered of		idress on	our records, <u>ent</u>	er the name of the
Name of New Registered Agent:	AIDA SALDIVAR SA	NCHEZ		
New Registered Office Address:	760 W SAMPLE ROAI	D BAY 1		
		Enter Flori	da street address	
	POMPANO BEACH		Florida	
	Ciņ	•		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 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.

Aida Saldivar

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records: FILED MGR = Manager AMBR = Authorized Member 2017 SEP 25 PK 1: 45 **Type of Action** Address Title <u>Name</u> N/Λ □ Add ☐ Remove ☐ Change ☐ Remove □ Change _□ Add ☐ Remove ☐ Change □ Add □ Remove ☐ Change □ Add ☐ Remove _□ Change □ Add ☐ Remove ☐ Change

Company is: AIDA SALDIVAR SANCHEZ	
760 W SAMPLE ROAD BAY 1 PO	
	If be managed by a manager or managers in accordance with
	ement of the business and affairs of the Company. These
regulations may contain any provisions for the regula	ation and management of the affairs of the Company not
inconsistent with law or these Articles of Organizatio	on. The names of all such manager(s) who is/are to serve as
manager(s) is/are:	
AIDA SALDIVAR SANCHEZ	MANAGER
760 W SAMPLE ROAD BAY 1 POMPANO BEAC	CH FL 33064
IN WITNESS WHEREOF, The undersigned, an auth	norized representative of the members, has made and
subscribed these Articles of Organization at Miami,	Florida, for the foregoing uses and purposes, this
August 29, 2017.	
	Aida Saldıvar
	Aida Saldivar Sanchez, Authorized Representative of
	the memebers
ctive date, if other than the date of filing:	(optional) prior to date of filing or more than 90 days after filing.) Pursuant to 6 pplicable statutory filing requirements, this date will not be li
ment's effective date on the Department of State's reco	201
ment's effective date on the Department of State's reco	t not an effective time, at 12:01 a.m. on the ear

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Filing Fee: \$25.00

	OF REGISTERED AGENT DESIGNATED IN ART	FICLES OF ORGANIZATION
Aida Saldivar Sa	nchez, having a business office identical with the reg	istered office of the Company named above.
and having been	designated as the Registered Agent in the above and	foregoing Articles of Organization, is
familiar with and	accepts the obligations of the position of Registered	Agent under Section 605, 0113
Florida Statutes a	nd other applicable Florida Statutes.	
		Aida Saldivar
	Aid	da Saldivar Sanchez, Registered Agent
		2 2
		· ·
ffective date is fisted If the date insert ment's effective da	r than the date of filing: the date must be specific and cannot be prior to date of filinged in this block does not meet the applicable statutor ite on the Department of State's records.	y filing requirements, this date will not be li.
ecord specifies ie 90th day afte	a delayed effective date, but not an effecter the record is filed.	tive time, at 12:01 a.m. on the ear
d		
	Aida Saldiva	r
	Signature of a member or authorized represe	ntative of a member
	Signature of a member or authorized represe AIDA SALDIVAR SACE	ntative of a member

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Filing Fee: \$25.00



September 1, 2017

S & B QUALITY SERVICES INC **SELMA BARAHONA** 13805 NE 16 AVE. MIAMI, FL 33161

SUBJECT: TAQUERIA LATINA LLC

Ref. Number: L11000079311

We have received your document for TAQUERIA LATINA LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Effective January 1, 2014, all limited liability company forms must be submitted in accordance with the Revised Limited Liability Company Act, Chapter 605, Florida Statutes.

Please correct the statute you have listed on last page of the document.

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) 245-6051.

Karen A Salv Regulatory Specialist II

Letter Number: 117A00018187