

#L12000041861

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ MAIL

(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

K. SALLY  
EXAMINER  
JAN 23 2013



RALPH KENOL & ASSOCIATES, P.A.

January 15<sup>th</sup>, 2013

**VIA EXPRESS MAIL**

Florida Department of State  
Division of Corporations  
Attention:  
Ms. Karen Sally, Document Examiner  
Registration Section  
P.O. Box 6327  
Tallahassee, Florida 32314

**RE: Amendment to Articles of Organization for Sabores del Peru, LLC**

Dear Ms. Sally:

Please let this letter serve as a follow up to our discussion regarding a previously filed form to amend the articles of incorporation to include Ms. Fanny Carolina Gonzales Venegas. As we discussed, I had previously sent this form on December, 2012 but it has not yet been received. I am now sending a copy of what was previously filed along with a new check in the amount of thirty dollars. (\$30.00). You have advised that this will be acceptable documentation to make the change to the Articles of Organization.

If you have any questions or require any additional information, please do not hesitate to contact me at (954) 600-9228 or via email at [rk@ralphkenolpa.com](mailto:rk@ralphkenolpa.com). Thank you in advance for your time and consideration.

Sincerely,



Ralph Kenol



RALPH KÉNOL & ASSOCIATES, P.A.

**VIA US MAIL**

December 8<sup>th</sup>, 2012

Florida Department of State  
Division of Corporations  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**RE: Amendment to Articles of Organization for Sabores Del Peru, LLC**

To Whom It May Concern:

Please see the attached documents regarding an amendment to the Articles of Organization for Sabores Del Peru, LLC

Thank you in advance for your time and consideration in this matter.

Sincerely,

Ralph Kenol, Esq.

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Sabores del Peru

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:

Ralph Kenol

Name of Person

Ralph Kenol, PA

Firm/Company

2028 Harrison Street Suite 201-8

Address

Hollywood, FL 33020

City/State and Zip Code

rk@@ralphkenolpa.com

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

For further information concerning this matter, please call:

Ralph Kenol

Name of Person

at ( 954 ) 600-9228

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**

**Sabores del Peru**

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

FILED  
13 JAN 18 PM 4:26  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on March 26th, 2012 and assigned  
Florida document number L12000041861.

This amendment is submitted to amend the following:

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

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)**

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:**

Name of New Registered Agent: Ralph Kenol

New Registered Office Address: 2028 Harrison Street Suite 201-8

*Enter Florida street address*

Hollywood, Florida 33020

*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>
MGRM	Fanny Carolina Gonzales Venegas	18541 North Bay Road Sunny Isles Beach FL 33160	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

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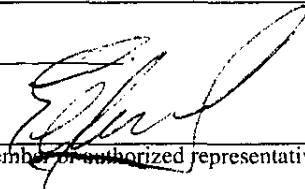
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Dated 11-29-2012 ,



Signature of a member or authorized representative of a member

**Epifanio Mendoza**

Typed or printed name of signee

**Page 3 of 3**

**Filing Fee: \$25.00**