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TALLAHASSEE, FLORIDA

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JUN 16 2014

S. YOUNG

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Tienda mexicana and Taqueria 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:

Adam Sander III
Name of Person

Tienda mexicana and Taqueria LLC
Firm/Company

4394 Blountstown Highway
Address

Tallahassee, FL 32304
City/State and Zip Code

matrixone@aol.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Eva S. Thorpe at (850) 228-7541
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

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TALLAHASSEE, FLORIDA

Tienda Mexicana and Tiquera LLC

(A Florida Limited Liability Company)

A 2 Z Services LLC

48 P.A. Sanders Road
Sopchoppy, FL 32358

48 P.A. Sanders Road
Sopchoppy, Fl 32358

Page 1 of 3

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager
AMBR = Authorized Member

Title	Name	Address	Type of Action
AMBR or MGR	Barbara Juan Monica Thorpe	48 P.A. Sanders Rd. Sopchoppy, FL 32358	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
AMBR	Adam Sanchez III	48 P.A. Sanders Rd. Sopchoppy, FL 32358	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
AMBR	Zachary Norman Alday	391 Kever Lane Quincy, FL 32351	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
AMBR	Je'Juan Henderson	1356 Boys drive GPW, MI 48236	<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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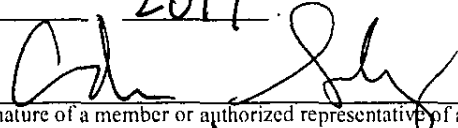
D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

New E-mail LaescandidaLLC@aol.com

E. Effective date, if other than the date of filing: _____ (optional)

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated 6 / 16 2014



Signature of a member or authorized representative of a member

Adam Sanchez

Typed or printed name of signee

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Filing Fee: \$25.00

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14 JUN 16 03 46 PM
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TALLAHASSEE, FLORIDA