

L13000022886

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H14000110803 3)))



H140001108033ABCS

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

EFFECTIVE DATE
5-8-14

To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : CORP USA
Account Number : 072450003255
Phone : (305) 634-3694
Fax Number : (786) 409-5946

FLORIDA DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

14 MAY - 8 PM 3:07

FILED

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
LOS ANDES RESTAURANT, LLC.**

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

74039

no fax
5/9/14

RECEIVED

14 MAY - 9 AM 10:52

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Electronic Filing Menu

Corporate Filing Menu

Help

MAY 12 2014

T. BROWN

5/8/2014



May 9, 2014

FLORIDA DEPARTMENT OF STATE
Division of Corporations

LOS ANDES RESTAURANT, LLC.
1631 SE 3RD COURT
DEERFIELD BEACH, FL 33441

SUBJECT: LOS ANDES RESTAURANT, LLC.
REF: L13000022886

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The effective date must be specific and cannot be prior to the date of filing.

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.

Teresa Brown
Regulatory Specialist II

FAX Aud. #: H14000110803
Letter Number: 914A00009938

RECEIVED
14 MAY -9 AM 10:52
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

P.O BOX 6327 - Tallahassee, Florida 32314

4

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

H14000011081

EFFECTIVE DATE
5-8-14

LOS ANDES RESTAURANT, LLC

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

The Articles of Organization for this Limited Liability Company were filed on 02/12/2013 and assigned
Florida document number L13000022886

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 "LLC."

Enter new principal offices address, if applicable: 1631 SE 3RD COURT
(Principal office address MUST BE A STREET ADDRESS) DEERFIELD BEACH, FL 33441

Enter new mailing address, if applicable: 1631 SE 3RD COURT
(Mailing address MAY BE A POST OFFICE BOX) DEERFIELD BEACH, FL 33441

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:

New Registered Office Address:

Enter Florida street address

City, Florida 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.

If Changing Registered Agent, Signature of New Registered Agent

H140000110803

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

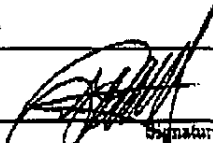
<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
<u>MGMR</u>	<u>CESAR E. PUEBLA</u>	<u>1631 SE 3RD COURT</u>	<input type="checkbox"/> Add
		<u>DEERFIELD BEACH, FL 33441</u>	<input checked="" type="checkbox"/> Remove
<u>MGMR</u>	<u>CESAR D. PUEBLA</u>	<u>1631 SE 3RD COURT</u>	<input checked="" type="checkbox"/> Add
		<u>DEERFIELD BEACH, FL 33441</u>	<input type="checkbox"/> Remove
<u> </u>	<u> </u>	<u> </u>	<input type="checkbox"/> Add
		<u> </u>	<input type="checkbox"/> Remove
<u> </u>	<u> </u>	<u> </u>	<input type="checkbox"/> Add
		<u> </u>	<input type="checkbox"/> Remove
<u> </u>	<u> </u>	<u> </u>	<input type="checkbox"/> Add
		<u> </u>	<input type="checkbox"/> Remove
<u> </u>	<u> </u>	<u> </u>	<input type="checkbox"/> Add
		<u> </u>	<input type="checkbox"/> Remove

HH4000011083

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

E. Effective date, if other than the date of filing: 05/08/2014 (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 MAY 8, 2014



Signature of a member or authorized representative of a member
CESAR E. PUEBLA

Typed or printed name of signer

Page 3 of 3

Filing Fee: \$25.00

HH4000011083

05/09/2014 10:59 3056339696

CORPUSA

PAGE 05/05