

L13000057821

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(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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APR 1 2014

B. BOSTICK

APR - 2 2014

EXAMINER

## COVER LETTER

TO: Registration Section  
Division of Corporations

\*\*\*\*\*TOVEAR ENTERPRISES 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:

\*\*\*\*\*Mariela M. Arbelaez\*\*\*\*\*

\_\_\_\_\_  
Name of Person

TOVEAR ENTERPRISES LLC

\_\_\_\_\_  
Firm/Company

17201 Collins Ave # 506

\_\_\_\_\_  
Address

Sunny Isles, FL 33160

\_\_\_\_\_  
City/State and Zip Code

TovearenterprisesLLc@gmail.com

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

For further information concerning this matter, please call:

Mariela M Arbelaez

786 853-6488

at (\_\_\_\_\_) \_\_\_\_\_

\_\_\_\_\_  
Name of Person

\_\_\_\_\_  
Area Code

\_\_\_\_\_  
Daytime Telephone Number

Enclosed is a check for the following amount:

- |  |  |  |  |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(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

**TO  
ARTICLES OF ORGANIZATION  
OF**

**TOVEAR ENTERPRISES 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 04/19/2013 and assigned  
Florida document number L13000057821.

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)**

Mariela M. Arbelaez

17201 Collins Ave # 506

Sunny Isles, FL 33160

**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:

Mariela M. Arbelaez

New Registered Office Address:

17201 Collins Ave, # 506

*Enter Florida street address*

Sunny Isles

Florida 33160

*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 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.*

*Mariela M. Arbelaez*  
**If Changing Registered Agent, Signature of New Registered Agent**

**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>
MGR	Jorge E. Arbelaez	17201 Collins Ave. # 506	<input type="checkbox"/> Add
		Sunny Isles, FL 33160	<input checked="" type="checkbox"/> Remove
MGR	Ruben D. Velasquez	17201 Collins Ave # 2002	<input type="checkbox"/> Add
		Sunny Isles, FL 33160	<input checked="" type="checkbox"/> Remove
MGR	Jorge E. Torres	17201 Collins Ave # 506	<input checked="" type="checkbox"/> Add
		Sunny Isles, FL 33160	<input type="checkbox"/> Remove
MGR	Elizabeth Torres	17201 Collins Ave # 506	<input checked="" type="checkbox"/> Add
		Sunny Isles, FL 33160	<input type="checkbox"/> Remove
MGR	Mariela M. Arbelaez	17201 Collins Ave # 506	<input checked="" type="checkbox"/> Add
		Sunny Isles , FL	<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

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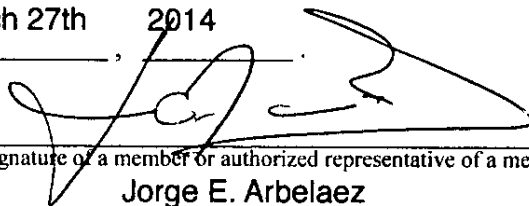
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**E. Effective date, if other than the date of filing: \_\_\_\_\_ (optional)**

(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)

\*\*\*\*\* March 27th 2014

Dated \_\_\_\_\_,



Signature of a member or authorized representative of a member

Jorge E. Arbelaez

Typed or printed name of signee

2014 MAR 27 PM 3:30  
MAR 27 2014