

L13000069995

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

W

AUG - 7 2013

J. BRYAN



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 31, 2013

MARIA ELENA MENDEZ
LA CHISPAS SERVICES LLC
2720 W WATERS AVE.
TAMPA, FL 33614

SUBJECT: LA CHISPAS SERVICES LLC
Ref. Number: L13000069995

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TALLAHASSEE, FLORIDA

We have received your document for LA CHISPAS SERVICES LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You completed the wrong form

We are enclosing the proper form(s) with instructions for your convenience.

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.

Joey Bryan
Regulatory Specialist II

Letter Number: 813A00018410

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: La Chispas Services 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:

Maria E Mendez

Name of Person

La Chispas Services LLC

Firm/Company

2720 W Waters Ave

Address

Tampa, FL 33614

City/State and Zip Code

lachispaservices@yahoo.com

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

For further information concerning this matter, please call:

Maria E Mendez

Name of Person

at (813) 933-1951

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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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Tampa, July 20, 2013

AMENDMENT SECTION
DIVISION OF CORPORATIONS

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Dear Sirs:

Hereby I send my application for Amendment LLC, in which I am 100% owner to remove from the list of manager Mr. Herman Ricardo Amaya.

I appreciate your attention to this and if you want to contact me you can call me at 813.933.1951.



MARIA ELENA MENDEZ
2720 W WATERS AVE
TAMPA, FL 33614
marucamendez@yahoo.com

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

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TALLAHASSEE, FLORIDA

LA CHISPAS SERVICES 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 May 10, 2013 and assigned
Florida document number L130 000 69995

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)

Same

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

Same

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:

None

New Registered Office Address:

Enter Florida street address

Florida

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

MGR = Manager
MGRM = Managing Member

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TALLAHASSEE, FLORIDA

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

Dated August 5, 2013



Signature of a member or authorized representative of a member

Maria E Mendez

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

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TALLAHASSEE, FLORIDA