

L13000134177

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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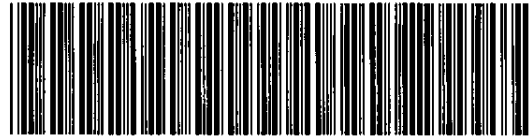
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DEC 16 2013

T. HAMPTON

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: One Stop Kitchens & Cabinets 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:

Carlos E. Vazquez
Name of Person

One Stop Kitchens & Cabinets LLC
Firm/Company

11650 Ashridge PL.
Address

Orlando FL. 32824
City/State and Zip Code

adriana.realtor@hotmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Carlos Vazquez
Name of Person
at (407) 486-6168
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
Citron Building
2661 Executive Center Circle
Tallahassee, FL 32301

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

One Stop Kitchens & Cabinets 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 09/23/2013 and assigned
Florida document number L13000134177.

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TALLAHASSEE, FLORIDA

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 abbreviation "LLC."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Carlos E. Vazquez

11650 Ashridge PL.

Orlando FL. 32824

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:

Carlos E. Vazquez

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

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

Title	Name	Address	Type of Action
MGR	Carlos E. Vazquez	11650 Ashridge PL. Orlando FL. 32824	☒ Add ☐ Remove
MGR	Luz A. Vazquez	11650 Ashridge PL. Orlando FL. 32824	☐ Add ☒ Remove
			☐ Add ☐ Remove
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Correct The registered Agent Name: Carlos E. Vazquez

Dated

12/10/2013

Signature of a member or authorized representative of a member

CARLOS E. VAZQUEZ

Typed or printed name of signer

Page 3 of 3

Filing Fee: \$25.00

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