

L13000153561

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

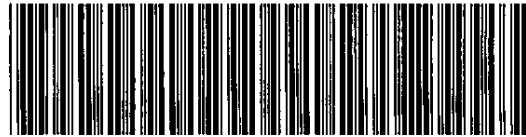
(Business Entity Name)

(Document Number)

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10/10/14

## COVER LETTER

**TO: Registration Section**  
**Division of Corporations**

**SUBJECT:** Alina Sanchez-Garcia, LLC (want to amend to El Angel Real Estate Company, 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:

**Alina Sanchez-Garcia**

Name of Person

**El Angel Real Estate Company**

Firm/Company

**2800 Egret Way**

Address

**Cooper City, Florida 33026**

City/State and Zip Code

**elangelrealestate@aol.com**

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

For further information concerning this matter, please call:

**Alina Sanchez-Garcia**

Name of Person

at **954 274-8759**

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

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

Alina Sanchez-Garcia, 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 10/31/2013 and assigned Florida document number L13000153561.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

El Angel Real Estate Company, LLC

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)**

El Angel Real Estate Company, LLC

2800 Egret Way

Cooper City, Florida 33026

**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:

Alina Sanchez-Garcia

New Registered Office Address:

2800 Egret Way

Enter Florida street address

Cooper City

Florida 33026

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.*

Alina Sanchez-Garcia  
If Changing Registered Agent, Signature of New Registered Agent

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>
MGRM	Alina Sanchez-Garcia	2800 Egret Way	<input type="checkbox"/> Add
		Cooper City, FL 33026	<input type="checkbox"/> Remove
		(same as on record)	
			<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.)*

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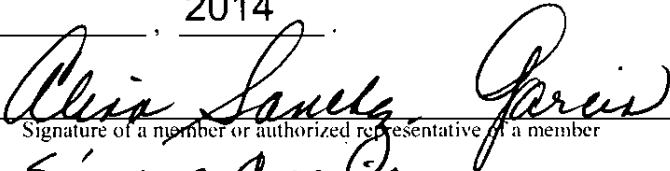
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**E. Effective date, if other than the date of filing:** \_\_\_\_\_ **(optional)**

(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)

Dated June 12, 2014

  
\_\_\_\_\_  
Signature of a member or authorized representative of a member  
ALINA SANCHEZ-CARCIA  
\_\_\_\_\_  
Typed or printed name of signee

16-MIS-7-AMIC 2.  
OFFICE OF THE CLERK  
JUN 13 2014