L14000057926

(Dannaria)	- N
(Requestor	s Name)
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(Address)	
(Cit. (Ct.)	7:- (17)
(City/State/	Zip/Phone #)
PICK-UP	WAIT MAIL
(Business E	Entity Name)
(Document	Number)
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COVER LETTER

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* Division of Corporations				
SUBJECT: Betancourt Ir Enterprises 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:				
Melquiseclee Betancount Name of Person				
wame of rerson				
Firm/Company				
Address Sarasota Fl 34234 City/State and Zip Code Mbcustomauto care a gmail. com E-mail address: (to be used for future annual report notification)				
Address				
Sarasota Fl 34234				
City/State and Zip Code				
mblustomauto care (a) gmail: (om				
For further information concerning this matter, please call:				
Melqvisedec Betancount at (941) 587 3020 Name of Person Area Code Daytime Telephone Number				
Name of Person Area Code Daytime Telephone Number				
Enclosed is a check for the following amount:				
□ \$25.00 Filing Fee Certificate of Status 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

FILED 2014 JUN 26 PM 12: 19

SELECTARY OF STATE TALLAHASSEE, FLORIDA

Betancourt Jr (Name of the Limited	Enter pri	5e5	LLC.		
(Name of the Limited (A	Liability Company Florida Limited Lia	y as it now a ability Comp	appears on our pany)	records.)	
The Articles of Organization for this Limited Liab Florida document number <u>L140000 579</u>		vere filed o	on April "	7th 2014	and assigned
This amendment is submitted to amend the follow	ving:				
A. If amending name, enter the new name of the	he limited liabili	ity compa	ny here:		
The new name must be distinguishable and end with the wo	ords "Limited Liabili	ty Company	," the designation	on "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicab	ole:	1940	11+1	Street	3 l p
(Principal office address MUST BE A STREET	ADDRESS)	_Sa	rasota 1	FI 342	36
	•				<u> </u>
Enter new mailing address, if applicable:					
(Mailing address MAY BE A POST OFFICE BO	<u>0X)</u>				
B. If amending the registered agent and/or registered agent and/or the new registered office	registered office address here:	ce addres	ss on our re	cords, <u>enter</u>	the name of the new
Name of New Registered Agent:	Melquis	edec	Betano	ourt	34236 Zip Code
New Registered Office Address:	1940	11 th	Street		
	0	Ente	er Florida street	address	
	Saras	sota		_, Florida	34236
New Registered Agent's Signature, if changing Reg		City			Zip Code
I hereby accept the appointment as registered to		to out in	this samesin	. I Gustlana a -	
provisions of all statutes relative to the proper	and complete pe	erformand	ce of my duti	es, and I am j	familiar with and
accept the obligations of my position as registe being filed to merely reflect a change in the reg	red agent as pro zistered office ac	ovided for ddress, I i	r in Chapter hereby confii	605, F.S. Or, mythat the lin	if this document is nited liability

Page 1 of 3

I Changing Registered Agent, Signature of New Registered Agent

company has been notified in writing of this change.

If amending the Managers or Authorized Member on our records, <u>enter the title, name, and address of each Manager or Authorized Member being added or removed from our records</u>:

MGR'= N AMBR = A	Aanager Authorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
Hge_	Carment Padro	1940 11th Street	Add
		Sarasota, fl 34236	J Remove
owner!	Melguisedec Betancourt Ir	1940 11th Street	Add
·	Betan court Ir	1940 11th Street Sarasota, FJ 34236	Remove
			□ Add
			□ Remove .
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Effectiv (The effec	ve date, if other	er than the specific, can	date of filing	of receipt or	filed date and cannot	be more than 9	(optional) 0 days after
			orida Department				•
Dated _	June	191	H ,	2014	·		
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		Mela	Prisecles	Defin	nearly 1		
					nearest 1	e of a member	
					horized representative Court. Ited name of signee	e of a member	

Page 3 of 3

Filing Fee: \$25.00

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