## 14000094490

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(Address)
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(Document Number)
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10/02/17--01016--001 \*\*52.50

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2017 GCT 16 PX 4: 02

CCT 18 2027 RIE

## **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: Maria Rosquio Bolquica, LhC 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:
Tleang Haria Hernandez  Name of Person  Maria Rosquio Botanica, LLC  Firm/Company
Name of Person
Maria Rosquio Botanica LLC
Firm/Company
1916 E Atlantie Blud #3
Address
POMPANO Beach Fl , 33060
Chyrolade and Tally Code
i Hernander 0361 Q GNAIL. COM E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Tleang M. Hernander at (950) 882-2795  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 □ \$30.00 Filing Fee & Certificate of Status Certificate of Status & Certificate of Status & Certificate 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



October 3, 2017

ILEANA MARIA HERNANDEZ 1216 E ATLANTIC BLVD #3 POMPANO BEACH, FL 33060

SUBJECT: MAMA' ROSARIO BOTANICA, LLC

Ref. Number: L14000094480

We have received your document for MAMA' ROSARIO BOTANICA, LLC and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a CORPORATION, but your entity is a LLC. Please complete and return the enclosed blank form(s).

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.

Jenna D Harris Regulatory Specialist II

Letter Number: 117A00020003

2017 GCT 18 PM 2:57

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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Mana ROSARIO BOTUNIO	ta, LLC	
(Name of the Limited Liability Compar (A Florida Limited L	ny as it now appears on our records liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number	were filed on <i>06/12/11</i>	4 and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabing $\mathcal{N}/\mathcal{A}$ The new name must be distinguishable and contain the words "Limited Liability".		
The new name must be distinguishable and contain the words "Limited Liabili	ity Company," the designation "LLC"	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	N/A	<sup>2</sup> 23
(Principal office address MUST BE A STREET ADDRESS)		0.00
	<del></del>	<u> </u>
Enter new mailing address, if applicable:	N/4	5 ES
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here		, enter the name of the ne
Name of New Registered Agent: ILEAL	na Mahia HERNA Enter Florida street address	ndez
New Registered Office Address:	Enter Florida street address	
	, Flo	orida
	~~~	

New Registered Agent's Signature, if changing Registered Agent:

1

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.

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager .

AMBR = Authorized Member

Title Name <u>Address</u> **Type of Action** JORGE LAZORO DIOZ 1216 E. Alkantic Blud #3 - Add MGB Pompono Broch FL 33060 Remove MGB ILEANO MARIO HERMONDER 1216 E. Atlantic BIND #3 XAND Pompano Brach FL 33060 - Remove ☐ Change □ Add ☐ Remove □ Change □ Add ☐ Remove 了 Chance ☐ Remove \_\_\_\_C \_\_\_ Change □ Add ☐ Remove ☐ Change

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Filing Fee: \$25.00