

L14000095626

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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SECRETARY OF STATE  
ALLAHASSEE, FLORIDA

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S Warren

JAN 19 2017

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT: MEJA ALPIZAR 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:

BAO NGUYEN

\_\_\_\_\_  
Name of Person

MEJA ALPIZAR LLC

\_\_\_\_\_  
Firm/Company

11150 OKEECHOBEE BLVD SUITE R

\_\_\_\_\_  
Address

ROYAL PALM BEACH FL 33411

\_\_\_\_\_  
City/State and Zip Code

baonguyen7990@yahoo.com

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

For further information concerning this matter, please call:

BAO NGUYEN

561 2815861  
at ( )

\_\_\_\_\_  
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

☐ \$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**

MEJIA ALPIZAR 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 06/16/2014 and assigned  
Florida document number L14000095626.

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 contain 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)

11150 OKEECHOBEE BLVD

SUITE R

ROYAL PALM BEACH FL 33411

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

11150 OKEECHOBEE BLVD

SUITE R

ROYAL PALM BEACH FL 33411

**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:

BAO NGUYEN

New Registered Office Address:

11150 OKEECHOBEE BLVD SUITE R

*Enter Florida street address*

ROYAL PALM BEACH

, Florida 33411

*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.*

  
If Changing Registered Agent, Signature of New Registered Agent

SECRETARY OF STATE  
FLORIDA  
JUN 17 2014

**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**

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	ILIANA CAMPOS	8656 GRASSY ISLE TRL	<input type="checkbox"/> Add
		LAKE WORTH FL 33467	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	WAGNER MEJIA	8656 GRASSY ISLE TRL	<input type="checkbox"/> Add
		LAKE WORTH FL 33467	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	BAO NGUYEN	11150 OKEECHOBEE BLVD	<input checked="" type="checkbox"/> Add
		SUITE R	<input type="checkbox"/> Remove
		ROYAL PALM BEACH FL 33411	<input type="checkbox"/> Change
MGR	AMY NGUYEN	11150 OKEECHOBEE BLVD	<input checked="" type="checkbox"/> Add
		SUITE R	<input type="checkbox"/> Remove
		ROYAL PALM BEACH FL 33411	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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 TALLAHASSEE, FLORIDA

[illegible]

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

Dated January 12, 2017

Signature of a member or authorized representative of a member

BAO NGUYEN  
Typed or printed name of signee

**Filing Fee: \$25.00**

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2017 JUN 17 P 12:35  
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