

From:

10/03/2014 16:23

#169 P.001/005

-L14000137028-

Division of Corporations

Page 1 of 2

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To: Division of Corporations
Fax Number : (850)617-6383

From: Account Name : SONIA TAX & TRAVEL SERVICES, INC
Account Number : I20040000014
Phone : (407)847-4700
Fax Number : (407)935-9055

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

14 OCT -3 PM 4:15

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****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

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**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
DANIEL MATEO CRUZ LLC**

Certificate of Status	0
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DIVISION OF CORPORATIONS
BUREAU OF COMMERCIAL
INFORMATION SERVICES

F. Burch OCT 16 2014

From:

10/03/2014 16:23

#169 P.002/005

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: DANIEL MATEO CRUZ LLC

DOCUMENT NUMBER: L14000137028

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

DANIEL MATEO CRUZ
Name of Contact Person

MATEO ENTERPRISES S LLC
Firm/ Company

3819 HIDEAWAY BAY BLVD UNIT 101
Address

KISSIMMEE , FL 34741
City/ State and Zip Code

soniastax-travel@hotmail.com

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

For further information concerning this matter, please call:

SONIA R VASQUEZ at (407) 847-4700
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

- \$35 Filing Fee
- \$43.75 Filing Fee & Certificate of Status
- \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)
- \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)

Mailing Address
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

DANIEL MATEO CRUZ 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 09-02-2014 and assigned Florida document number L14000137028

This amendment is submitted to amend the following:

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

MATEO ENTERPRISES S 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)

Blank lines for principal office address.

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

Blank lines for mailing address.

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:

Blank line for name of new registered agent.

New Registered Office Address:

Blank line for new registered office address.

Enter Florida street address

Blank line for city and state.

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 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

FILED 14 OCT -3 PM 4:45 SECRETARY OF STATE TALLAHASSEE FLORIDA

From:

10/03/2014 16:24

#169 P.004/005

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>
MGR:	DANIEL HATEO CIVILIZ	SAME AS ABOVE	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
		N/A	<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
		N/A	<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
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			<input type="checkbox"/> Add <input type="checkbox"/> Remove

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From:

10/03/2014 16:24

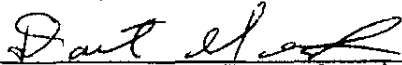
#169 P.005/005

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

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 SEPTEMBER 09, 2014



Signature of a member or authorized representative of a member

DANIEL MATEO CRUZ

Typed or printed name of signee

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14 OCT - 3 PM L:LS
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TALLAHASSEE, FLORIDA