

L14000145253

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

O SIMMONS

MAR 21 2018

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: GARCIA R 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:

Alvaro Garcia
Name of Person

GARCIA R LLC
Firm/Company

1860 Venetian Point dr
Address

CLEARWATER FL 33755
City/State and Zip Code

AGD@omEGA.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Alvaro Garcia at (727) 424 0490
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|---|---|--|--|
| <input type="checkbox"/> \$25.00 Filing Fee | <input checked="" type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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**

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 09/17/2014 and assigned Florida document number L14000145253

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)

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:

GARCIA ALVARO J

New Registered Office Address:

1860 Venetian Point dr.

Enter Florida street address

CLEARWATER, Florida 33755

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

* 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

Address

FILED
MAR 20 10:25
SECRET
TILMAN-SEE-FLORIDA
Type of Action

AMBA GARCIA Alvaro J

☐ Remove

1860 Venetian Point dr ☒ Change
CLEARWATER FL 33755

☐ Add

☐ Remove

AMBR Ramirez de GARCIA
CARLOTA

1860 Venetian Point dr ☒ Change
CLEARWATER FL 33755

☐ Add

☐ Remove

MGR GARCIA Ana Carlota

1860 Venetian Point dr ☒ Change
CLEARWATER FL 33755

☐ Add

MGR GARCIA Alvaro J

101 N MISSOURI Ave #1 ☒ Remove
CLEARWATER FL 33755

☐ Change

☐ Add

MGR GARCIA Oscar
Daniel

101 N Missouri Ave #1 ☒ Remove
CLEARWATER FL 33755

☐ Change

MGR GARCIA Orlando
JOSE

☐ Add

101 N Missouri Ave #1 ☒ Remove
CLEARWATER FL 33755

☐ Change

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TALLAHASSEE, FLORIDA

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18
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated

Signature of a member or authorized representative of a member

ALVARO GARCIA
Typed or printed name of signee