

44000145457

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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☐ WAIT

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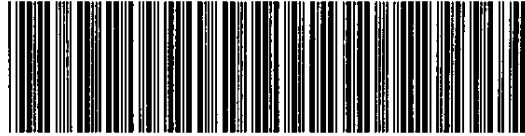
(Business Entity Name)

(Document Number)

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STATE OF ARIZONA  
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AUG 18 2015

S. YOUNG

## COVER LETTER

TO: **Registration Section**  
**Division of Corporations**

SUBJECT: LAS CASITAS, ARCHITECTURE & INTERIORS, 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:

XAVIER E. GARCIA, SR  
Name of Person

LAS CASITAS, ARCH. & INTERIORS, LLC  
Firm/Company

3277 FRUITVILLE RD, D2  
Address

SARASOTA, FL 34237  
City/State and Zip Code

XAVSR@LASCASITAS.COM  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

XAVIER E. GARCIA, SR. at 941 504-5277  
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

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15 AUG 17 AM 11:53  
TALLAHASSEE, FL 32301  
REGISTRY OF STATE  
CORPORATIONS

*[Handwritten signature]*

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

LAS CASITAS ARCHITECTURE & Interiors, 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 10/20/2014 and assigned Florida document number L14000145457

This amendment is submitted to amend the following:

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

N/A

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)**

N/A

**Enter new mailing address, if applicable:**

**(Mailing address MAY BE A POST OFFICE BOX)**

N/A

**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:

N/A

New Registered Office Address:

Enter Florida street address

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.*

N/A

**If Changing Registered Agent, Signature of New Registered Agent**

*[Handwritten signature]*

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	MARCO A. ORLANDO	3277 FRUITVILLE RD	<input type="checkbox"/> Add
		SUITE D-2	<input checked="" type="checkbox"/> Remove
		SARASOTA, FL 34237	<input type="checkbox"/> Change
MGR	DAVID MICHAEL BLACK	3277 FRUITVILLE RD	<input checked="" type="checkbox"/> Add
		SUITE D-2	<input type="checkbox"/> Remove
		SARASOTA, FL 34237	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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TALLAHASSEE, FLORIDA

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

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FEDERAL DISTRICT COURT  
SOUTHERD DISTRICT OF TEXAS

**E. Effective date, if other than the date of filing:** \_\_\_\_\_ (optional)

(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)

**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.

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 AUGUST 10, 2015

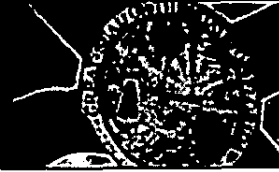
Signature of a member or authorized representative of a member

XAVIER E. GARZA, SR.

GENERAL MANAGER

Typed or printed name of signee

*[Signature]*

FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS**Detail by Entity Name****Florida Limited Liability Company**

LAS CASITAS, ARCHITECTURE &amp; INTERIORS, LLC

**Filing Information**

<b>Document Number</b>	L14000145457
<b>FEI/EIN Number</b>	47-1914536
<b>Date Filed</b>	09/10/2014
<b>Effective Date</b>	09/08/2014
<b>State</b>	FL
<b>Status</b>	ACTIVE
<b>Last Event</b>	LC AMENDMENT
<b>Event Date Filed</b>	10/20/2014
<b>Event Effective Date</b>	NONE

**Principal Address**3277 FRUITVILLE ROAD  
D2  
SARASOTA, FL 34237**Mailing Address**3277 FRUITVILLE ROAD  
D2  
SARASOTA, FL 34237**Registered Agent Name & Address**GARCIA, XAVIER E, SR.  
3277 FRUITVILLE ROAD  
D2  
SARASOTA, FL 34237**Authorized Person(s) Detail****Name & Address**

Title MGR

GARCIA, XAVIER E, SR.  
3277 FRUITVILLE ROAD, D2  
SARASOTA, FL 34237

Title MGR

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

8/10/2015

Detail by Entity Name

GARCIA, ALICIA E  
3277 FRUITVILLE ROAD, D2  
SARASOTA, FL 34237

Title MGR

ORLANDO, MARCO A  
3277 FRUITVILLE ROAD, D2  
SARASOTA, FL 34237

REMOVED.  
SEE ATTACHED FORM.

### Annual Reports

Report Year	Filed Date
2015	01/09/2015

### Document Images

01/09/2015 -- ANNUAL REPORT

[View image in PDF format](#)

10/20/2014 -- LC Amendment

[View image in PDF format](#)

09/10/2014 -- Florida Limited Liability

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