Division of Corporations **Electronic Filing Cover Sheet**

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(((H14000271795 3)))



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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN ALEJANDRA CRUZADO & VILMA MONTOYA LLC

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2ND REQUEST

Electronic Filing Menu

Corporate Filing Menu

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November 25, 2014

FLORIDA DEPARTMENT OF STATE

ALEJANDRA CRUZADO & VILMA MONTOYA LLC
11806 SW 272 TERRACE
HOMESTEAD, FL 33032

SUBJECT: ALEJANDRA CRUZADO & VILMA MONTOYA LLC

REF: L14000154624

We received your electronically transmitted document. Rowever, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The effective date must be specific and cannot be prior to the date of filing.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Tim Burch Regulatory Specialist II FAX Aud. #: H14000271795 Letter Number: 914A00024963

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WEST OF COMMENCES

P.O BOX 6327 - Tallahassee, Florida 32314

H14000271795

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

(Name of the Limited Liability Company as it now appears on our records.)

ALEJANDRA CRUZADO & VILMA MONTOYA LLC

f	seema construct sampled)		J
The Articles of Organization for this Limited Liability Co.	mpany were filed on 10/03/2	014 and	assigned
Florida document number L14000154624			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limits	ed liability company here:		
THE CEVICHE AND GUACAMOLE HOUSE I	LLC		
The new name must be distinguishable and end with the words "Limit	ited Liability Company," the designat	ion "LLC" or the abbreviatio	a"LLC."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRE	ESS)		
		\$E	14
		AR H	§ 17
Enter new mailing address, if applicable:		AS:	₩ Elamon
(Mailing address MAY BE A POST OFFICE BOX)		m-<	01
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		Q I A	
B. If amending the registered agent and/or registered agent and/or the new registered office addre	red office address on our r	ecords, enter fin usn	of the new
1-518 reserved a Sent auto/Ol. the west satisfaction office agents	as nere:		
Name of New Registered Agent:	,		
New Registered Office Address:	Enter Florida stree	I address	
		, Florida	
	City	Zip Co	de
New Registered Agent's Signature, if changing Registered.	Agent:		
I hereby accept the appointment as registered agent as provisions of all statutes relative to the proper and con accept the obligations of my position as registered age being filed to merely reflect a change in the registered company has been notified in writing of this change.	nd agree to act in this capacit inplete performance of my dut ent as provided for in Chapter	ies, and I am familiar 605, F.S. Or, if this de	with and ocument is
	If Changing Registered Agent, Sign	nature of New Registered A	gent

Page 1 of 3

H 1 4000271795

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 = M AMBR = A	anager uthorized Member		
Title	Name	Address	Type of Action
		·.	Add
			□ Remove
			Add
			∑ (☐ Remove
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(optional)
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member

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