L14000189535

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(City/State/Zip/Filone 4)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



400302582514

08/28/17--01001--005 **75.00

17 AUG 25 PH 3: 4#

17 AUG 25 PH I...

S. WARREN AUG 2 8 2017



August 28, 2017

CAPITAL CONNECTION, INC.

SUBJECT: EL TORO ROJO HOLDINGS LLC

Ref. Number: L14000189535

We have received your document for EL TORO ROJO HOLDINGS LLC, however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$25.00.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

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

Letter Number: 017A00017642

Stacey M Warren Regulatory Specialist II

www.sunbiz.org

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

EL TORO ROJO H	OLDINGS, LLO	C	
			Art of Inc. File
			LTD Partnership File
			Foreign Corp. File
			L.C. File
			Fictitious Name File
			Trade/Service Mark
			Merger File
			Art. of Amend. File
			RA Resignation
			Dissolution / Withdrawal
			Annual Report / Reinstatement
			Cert. Copy
			Photo Copy
			Certificate of Good Standing
			Certificate of Status
			Certificate of Fictitious Name
			Corp Record Search
			Officer Search
			Fictitious Search
			Fictitious Owner Search
Signature			Vehicle Search
			Driving Record
Requested by: BA	.		UCC 1 or 3 File
	8/25/17		UCC 11 Search
Name	Date	Time	UCC 11 Retrieval
Walk-In	Will Pick Up	o	Courier

COVER LETTER

TO: Registration Se Division of Cor			
SUBJECT: <u>E</u>	L TORO ROJ Name of Lim	O HOLDINGS, lited Liability Company	<u>uc</u>
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	William	5. Kry. sher	II
		Firm/Company	
	13615 7	yrone Street	
	Hudson,	FL 3460	67
	Krysher wK C	o be used for future annual report notificat	tion)
For further information co	oncerning this matter, please ca	11:	
William S	Krysher, II Person	at (<u>727)</u> <u>267-0</u> Area Code Daytime Te	1975 Jephone Number
Enclosed is a check for the	e following amount:		
□ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 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

EL TORO ROSO F	HOLDINGS, LLC
(Name of the Limited Liability Come (A Florida Limited	pany as it now appears on our records.) I Liability Company)
The Articles of Organization for this Limited Liability Compare Florida document number	y were filed on 12/11/2014 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited lia	bility company here:
The new name must be distinguishable and contain the words "Limited Liab	oility Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	13615 Turone Street
(Principal office address MUST BE A STREET ADDRESS)	Hudson, FL 34667
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	13615 Tyrone Street Hudson, FL 34667
registered agent and/or the new registered office address her	- 1/ /
Name of New Registered Agent: 001116 New Registered Office Address: 13615	Tyrone Street
Huds	Enter Florida street address On Florida 34-667 City Zip Code
New Registered Agent's Signature, if changing Registered Agent:	
hereby accept the appointment as registered agent and agrowsisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as peing filed to merely reflect a change in the registered office	performance of my duties, and I am familiar with and provided for in Chapter 605, F.S. Or, if this document is
ompany has been notified in writing of this change.	17 AUG
If Chad	ging Begistered Agent, Signature of New Registered Agent
	= 0
Page 1	Lof3 ကြ≌်ယ္

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

1. 1.

MGR = N $AMBR = A$	Aanager Authorized Member		
Title	<u>Name</u>	Address	Type of Action
MGR	Magda Krysher	13615 Tyrone Street	Add
	3	13615 Tyrone Street Hudson, FL 34667	Remove
			Change
MGR	William S. Krysher II	13615 Tyrone Street Hudson, FL 34667	Add
	J	Hudson, FL 34667	Remove
			□ Change
			Add
			☐ Remove
			Change
			□ Add
			Remove
			Change
			Add
			□ Remeye
			Change -
			25 Add PH
			Remoye
			Change

			
-			
-			
			
_			
			
•		···	
vote: If the	(options date, if other than the date of filing: (options) date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing date inserted in this block does not meet the applicable statutory filing requirements, this date of filing or more than 90 days after filing date in the Department of State's records.	al) ng.) Pursuant t ite will not b	o 605.02 e listed
e record The 90tl	specifies a delayed effective date, but not an effective time, at 12:01 a.m day after the record is filed.	\mathbf{s} on the ϵ	arlier
ated	Mgust 25, 2017.		
	MIN TO	<u>:</u> :	17
	Signature of a member or authorized representative of a member		7 AUG
	William S. Kensher II		6 25
_	Typed or printed name of signee	: .]]
		ر میران میران	ዝ 3፡ 🞼
	Page 3 of 3	<i>돌</i> :	_
	Ç	<u> </u>	

Filing Fee: \$25.00