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

TO:	Registration So Division of Cor			
SUBJEC		xican Store LLC		
SUBJEC	۷۱،	Name of Lim	ited Liability Company	···
The encl	losed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please re	eturn all correspo	ondence concerning this matter	to the following:	
		Oscar Garcia		
			Name of Person	
		Garcia Mexican Store LLC	,	
			Firm/Company	
		600 6th Ave Suite 10		
			Address	
		Vero Beach, FL 32962		
		garciaverobeach@gmail.co	City/State and Zip Code	
		E-mail address: (to be used for future annual report nout	ication)
For furth	ier information c	oncerning this matter, please co	all:	
Oscar G	iarcia		772 216-6283	
	Name c	of Person	at () Area Code Daytime	Telephone Number
Enclosed	I is a check for t	he 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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Garcia Mexican Store LLC		
(Name of the Lin	ited Liability Company as it now appears on our r (A Florida Limited Liability Company)	records)
The Articles of Organization for this Limited [1.1600009760] Florida document number [1.1600009760]		and assigned
This amendment is submitted to amend the fol	lowing:	
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 appli	cable:	
(Principal office address MUST BE A STRE	ET ADDRESS)	7.5
Enter new mailing address, if applicable:		<u> </u>
(Mailing address MAY BE A POST OFFICE BOX)		7:11 RE
B. If amending the registered agent and registered agent and/or the new registered of th	d/or registered office address on our re	cords, <u>enter the name of th</u>
Name of New Registered Agent:	Oscai Garcia	
New Registered Office Address:	Enter Florida street a	address
		Florido
	City	, Florida Zin 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

Page 1 of 3

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>	Name	Address	Type of Action
AMBR	Sarita Jam	600 6th Ave Unit 10	D Add
		Vero Beach, FL32962	■ Remove
			☐ Change
			□ Add
			Remove
			☐ Change
			_□ Remove
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	<u> </u>
	
fective date, if other than the date of filing:	(optional)
in effective date is listed, the date must be specific and cannot be prior to date of the beer. If the date inserted in this block does not meet the applicable statuto cument's effective date on the Department of State's records.	ing or more than 90 days after filing.) Pursuant to 605.02 ry filing requirements, this date will not be listed:
record specifies a delayed effective date, but not an effec The 90th day after the record is filed.	ctive time, at 12:01 a.m. on the earlier
ned July 6th . 2017.	

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00