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S. PRATHER

COVER LETTER

TO:	Registration Se Division of Cor			
CHDI		D RICA'S PAELLA, LLC		
SUBJ	ECT:	Name of Limi	ited Liability Company	
The er	nclosed Articles of A	Amendment and fec(s) are sub-	mitted for filing.	
Please	return all correspo	ndence concerning this matter	to the following:	
		JORGE ENRIQUE SAAV	EDRA	
			Name of Person	
		AMERICA INCOME TAX		
			Firm/Company	
		2896 FOREST HILL BLV	• •	
			Address	
		PALM SPRINGS, FL 3340	96	
			City/State and Zip Code	
		jorgesaa@bellsouth.net		
		E-mail address: (t	o be used for future annual report notifi	cation)
For fu	rther information co	oncerning this matter, please ca	dl:	
JORG	E ENRIQUE SAA	VEDRA	561 856-1739 at ()	
	Name of	Person	Area Code Daytime	Telephone Number
Enclos	sed is a check for th	e following amount:		
x \$2	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

BACKYARD RICA'S PAELLA, LLC		
(<u>Name of the Limited Liabili</u> (A Florida	ty Company as it now appears on our records a Limited Liability Company)	- 1
The Articles of Organization for this Limited Liability C	Company were filed on 10/01/2018	HASSELFL FL
This amendment is submitted to amend the following:	5. 4 P. 199.	
A. If amending name, enter the new name of the lim	ited hability company nere:	
The new name must be distinguishable and contain the words "Lim	nited 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 ADDI	RESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)	 	
	 	
B. If amending the registered agent and/or regis registered agent and/or the new registered office add		s, enter the name of the nev
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street addres.	
	, Flo	orida 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	<u>Name</u>	<u>Address</u>	Type of Action
MGR	ADRIANA JIMENEZ	4580 BIDDEFORD AV #32 WEST PALM BEACH, FL 33417	
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			☐ Change
		<u></u>	□ Remove
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ated	OCTOBER 01	2018	
		went James	20
	Signati	ure of a member or authorized representative of a member	ALL ALL
	RICARDO JIMENEZ		SECRETA!
	,	Typed or printed name of signee	ORETARY OF

Filing Fee: \$25.00