

L16000175030

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

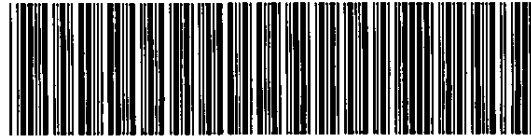
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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16 NOV 28 PM 4:09
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

D. SCOTT
NOV 28 2016



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 2, 2016

REBOLA & MUNOZ LLC
2716 W 84 ST
HIALEAH, FL 33016

SUBJECT: REBOLA & MUNOZ LLC
Ref. Number: L16000175030

RECEIVED
2016 NOV 28 PM 12:12
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

We have received your document for REBOLA & MUNOZ LLC and your check(s) totaling \$55.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

PLEASE INDICATE ON PAGE 2 OF 3 THE CHANGES BEING MADE.

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.

Dionne M Scott
Regulatory Specialist II

Letter Number: 316A000235

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TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Rebala & Munoz 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:

Name of Person
Ojitos Corp
Firm/Company
2716 W 8451
Address
Hialeah FL 33016
City/State and Zip Code
Newlifeforall@a.d.l.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Tere Ojito at (305) 821-2959
Name of Person Area Code Daytime Telephone Number

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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

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

Rebela E Munoz 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 9/19/2016 and assigned Florida document number L-16000175030

This amendment is submitted to amend the following:

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 applicable:

(Principal office address MUST BE A STREET ADDRESS)

ANAHI P. MUNOZ
1835 NW 58TH AVE
LAUDERHILL FL 3313

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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:

New Registered Office Address:

Enter Florida street address

Florida

City

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

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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>
P	Penelope Munoz INAHI	1835 NW 58 Ave Lauderdale FL 33313	<input type="checkbox"/> Add
	Penelope Munoz INAHI		<input checked="" type="checkbox"/> Remove
	Munoz ANAHI P. Munoz		<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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

Change Penelope MUNOZ INAHU
to:

MUNOZ ANAHI P (President)

(see attach Florida Driver License)

Address is the same

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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

10/18/2014

Tere Gyto Corp
Signature of a member or authorized representative of a member

Gyto Corp - Tere Gyto
Typed or printed name of signer

Florida *The Sunshine State*

DRIVER LICENSE CLASS E
M520-015-74-704-0

ANAHI P
MUNOZ
1835 NW 58 AVE
LAUDERHILL, FL 33313-4022
DOB: 06-04-1974 SEX: F
ISSUED: 05-27-2013 HGT: 5-08
EXPIRES: 06-04-2022
REST:
ENDORSE:
REPLACED: 10-19-2014

SAFE DRIVER

Operation of a motor vehicle constitutes consent to any sobriety test required by law.

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