L17000,48828

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

Office Use Only



600303304396

09/07/17--01010--011 **25.00

17. SEP -7. AH IO: 5.8. DIVISION OF ELRE (1947) AC

O SIMMONS SEP 1 3 7017

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Suarez & Suarez Foods, LLe 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:
Jorge Suarez Name of Person
Suarez & Suarez Foods, LLc Firm/Company
1810 W 56 ST APTO 340P Address
Healeah - Fl 330/2 City/State and Zip Code
JAUArezt 47@gmail.com E-mail address: (to be used for fiture annual report notification)
For further information concerning this matter, please call:
Forge Suarez at (786) 399 8880 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee S25.00 Filing Fee Certificate of Status Certified Copy (additional copy is enclosed) \$25.00 Filing Fee Certificate of Status Certified Copy (additional copy is enclosed) 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

Sucres & Suar	ez Foods, LLc
Suarez & Suar (Name of the Limited Liability (A Florida	Y Company as it now appears on our records.) Limited Liability Company)
The Articles of Organization for this Limited Liability C Florida document number $\frac{170000 + 882}{}$	company were filed on $\frac{O3/O6/20/7}{20/7}$ and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limi	ited liability company here:
N/A	ited Liability Company," the designation "LLC" or the abbreviation "LLC."
The new name must be distinguishable and contain the words "Lim	ited Liability Company," the designation "LLC" or the abbreviation "L.C."
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDR	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	MA
B. If amending the registered agent and/or registered agent and/or the new registered office add	stered office address on our records, enter the name of the new lress here:
Name of New Registered Agent:	lorge Suarez 10 W 50 ST APTO 3408 Enter Florida street address Laleah Florida 330/2 Zip Code
New Registered Office Address: / ?	10 W 56 ST AP70 3408 Futer Florida street address
\mathcal{H}	La/eah Florida 330/2
, , , , , , , , , , , , , , , , , , , 	City Zip Code
New Pagistared Agent's Signature, if changing Registers	ed Agent:

New Registered Agent's Signature, il 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 **Type of Action Address** Title Name 18/0 W 56TH STREET DAD ERNEST E VOM Swarez TORRES APTO 3408 Hialeah ARemove ☐ Add ☐ Remove _ Change □ Add ☐ Remove ☐ Change □ Add ☐ Remove ___ Change ☐ Add ☐ Remove ☐ Change

_	·
_	
_	
_	
_	
_	
	<u> </u>
_	SEP .
-	<u> </u>
-	SEP THOSE
_	
-	
_	

_	
fan eff <mark>Note:</mark>	ive date, if other than the date of filing:
	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of 90th day after the record is filed.
ated .	90th day after the record is filed. August 3/ , 20/7
	47
	Signature of a memoer of authorized representative of a memoer
	Forge Suarez Type or printed name of signee

Page 3 of 3

Filing Fee: \$25.00