

L17000049536

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

(Business Entity Name)

(Document Number)

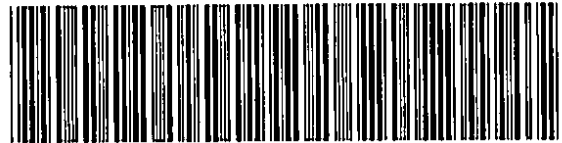
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FILED
2018 DEC 27 AM 9:40
SECRETARY OF STATE
TALLAHASSEE, FL

LTB
12-29-18



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 26, 2018

Eduardo Ayala
Loyal Enterprises LLC
3675 25th Ave., SW
Naples, FL 34117

SUBJECT: LOYAL ENTERPRISES LLC
Ref. Number: L17000049536

We have received your document for LOYAL ENTERPRISES 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.

The form you submitted is for a corporation, but your entity is a limited liability company. Please complete and return the enclosed blank form(s).

If you have any questions concerning the filing of your document, please call (850) 245-6900.

Lyn Shoffstall
Bureau Chief

Letter Number: 618A00024003

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: LOYAL ENTERPRISES 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:

EDUARDO AYALA

Name of Person

LOYAL ENTERPRISES INC

Firm/Company

3675 25TH AVE SW

Address

NAPLES, FL 34117

City/State and Zip Code

tlhaenterprises@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

EDUARDO AYALA

239

825-5595

at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|---------------------------------------------|------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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**

FILED

2018 DEC 27 AM 9:40

LOYAL ENTERPRISES LLC

SECRETARY OF STATE

(Name of the Limited Liability Company as it now appears on our records.) TALLAHASSEE, FL
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 3/02/2017 and assigned
Florida document number L17000049536.

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)

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

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

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MRS	MINDI LOPEZ	3675 25TH AVE SW	<input type="checkbox"/> Add
		NAPLES, FL 34117	<input checked="" type="checkbox"/> Remove
		3675 25TH AVE SW	<input type="checkbox"/> Change
MR	ALEJANDRO LOPEZ	NAPLES, FL 34117	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Change

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E. Effective date, if other than the date of filing: _____ (optional)

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.

Dated _____,

Signature of a member or authorized representative of a member

Typed or printed name of signee