1170000095330

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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COVER LETTER

TO: Registration Section Division of Corporations							
SUBJEC		Vorld Seafoo	d				
NOBIL	· • · _		Name of Lin	nited Liability Company			1
The encl	losed a	Articles of Ar	nendment and fee(s) are sub	omitted for filing.			
Please re	Hurn a	ll correspond	lence concerning this matter	to the following:			
			zaray suarez				
				Name of Person			
			World Seafood	. wine of the control			
				Firm/Company			
			3085 swain blvd				
				Address			
			greenacres FI 33463				
			Zaray1992@gmail.com	City/State and Zip Code		20.	· 1
			E-mail address: (to be used for future annual report notifies	uion)		
For furth	er info	ormation con-	cerning this matter, please c	all:		ا زم	
Zaray Su	iarez			561- 5613605148		_ 호 프	ं <u>स</u> ्
		Name of P	erson		elephone Number	52	ATIONS ATIONS
Enclosed	l is a c	heck for the	following amount:				n
■ \$25.0	00 Fili	ng Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□ \$60.00 Filing F Certificate of Certified Copy (additional copy i	Status & v	

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



December 12, 2019

ZARAY SUAREZ WORLD SEAFOOD 3085 SWAIN BLVD GREENACRES, FL 33463

SUBJECT: WORLD SEAFOOD LLC

Ref. Number: L17000095330

We have received your document for WORLD SEAFOOD LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

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) 245-6050.

Diane Cushing Senior Section Administrator

Letter Number: 019A00025182

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www.sunbiz.org

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

and assigned	
and assigned	
and assigned orida document number L17000095386 L17000095386 L18 amendment is submitted to amend the following: 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 "LLC" after new principal offices address, if applicable: Lailing address MUST BE A STREET ADDRESS) If amending address, if applicable: Lailing address MAY BE A POST OFFICE BOX) If amending the registered agent and/or registered office address on our records, enter the name of the new gistered agent and/or the new registered office address here: Name of New Registered Agent:	
LC" or the abbreviation "L.L.C."	
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3 3	
rds, <u>enter the name of the</u>	
ress	
Florida	
Zip Code	

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>	Type of Action
AMBR	Dixon J Maldonado Loaiza	3085 swain blvd greenacres FL 33463	
			■ Remove
		<u></u>	Change
AMBR	Rigy D Romero Javiere	3085 swain blvd greenacres FL	-
		35 17.5	
			☐ Remove
			Change
AMBR	Juan D Suarez Loaiza	3085 swain blvd greenaeres FL 33463	□ Add
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an effective date ote: If the dat	is listed, the date i	nust be specific a block does not	and cannot be pr t meet the app	licable statutor		0 days after filing.	Pursuant to 605.02 will not be listed	
e record spe The 90th da	ecifies a delay ay after the r	ed effective ecord is filed	date, but r d.	not an effec	tive time, at	12:01 a.m.	on the earlier	of:
ited	12/2020	<u> </u>	-·	·				
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		Signature of	member or au	thorized represe	ntative of a men	ber		

Page 3 of 3

Filing Fee: \$25.00