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COVER LETTER

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		istration Sect ision of Corp				
		ARK TRAIL	LLC			
SUBJEC	CT:		Name of Limit	ed Liability Company		
The encl	losed	Articles of A	mendment and fee(s) are subm	nitted for filing.		1
			dence concerning this matter to			
			LUZ L MORENO			_
				Name of Person		
	MORE ACCOUNTING PLUS TAX SERVICES INC					
				Firm/Company		
	2700 GLADES CIRCLE STE 164					
Address						_ ,
			WESTON FL 33327	Name of Person PLUS TAX SERVICES INC Firm/Company E STE 164 Address City/State and Zip Code EACCOUNTINGPLUS.COM s: (to be used for future annual report notification) e call:		
				City/State and Zip Code		-
					Daytime Telephone Number Daytime Telephone Number 218-5789 Daytime Telephone Number Certificate of Status & Certificate Copy	
			E-mail address: (t	o be used for future annual re	port notification)	1
For furt	her i	nformation co	oncerning this matter, please ca	11:		i.
LUZ M	IORI	ENO				<u> </u>
		Name of	Person		Daytime Telephone Number	
			6.19			
		a check for th	e following amount: S30.00 Filing Fee & Certificate of Status	Certified Copy	Certific (sed) Certific	ate of Status & di Copy
		Registr Divisio P.O. Bo	ING ADDRESS: ation Section n of Corporations ox 6327 assee, FL 32314	Registratio Division o Clifton Bu	on Section of Corporations	

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ARR TRAIL CLC	1
(Name of the Limited Liability Company as it now appears on our (A Florida Limited Liability Company)	records.)
The Articles of Organization for this Limited Liability Company were filed on 05/01/2017	and assigned
Florida document number L17000096028	
This amendment is submitted to amend the following:	9, 1
A. If amending name, enter the new name of the limited liability company here:	TAUG-3
The new name must be distinguishable and contain the words "Limited Liability Company," the designation	n "LLC" or the abbreviation "L.L.C." [7]
Enter new principal offices address, if applicable:	2 C
(Principal office address MUST BE A STREET ADDRESS)	5
	Tr.
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 registered agent and/or the new registered office address here:	ecords, enter the name of the new
Name of New Registered Agent:	<u> </u>
New Registered Office Address:	
Enter Florida stree	t address
C'.	, Florida
New Registered Agent's Signature, if changing Registered Agent:	Zip Code
I hereby accept the appointment as registered agent and agree to act in this capacity provisions of all statutes relative to the proper and complete performance of my dut accept the obligations of my position as registered agent as provided for in Chapter being filed to merely reflect a change in the registered office address, I hereby conficempany has been notified in writing of this change.	ies, and I am familiar with and 605, F.S. Or, if this document is

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>	Address	Type of Action
MGR	PAULINA RUGG	1150 NW 108TH TERR	□ Add
		PLANTATION FL 33322	■ Remove
			☐ Change
MGR	GUADALUPE DIAZ DE MATUS	1457 CAMELLIA CIR	
		WESTON FL 33327	☐ Remove
			☐ Change
			17 M G T T T
			DIVERNOR PH &: 50
			☐ Remove
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		08/01/2017				
Effective date, if other than (If an effective date is listed, the date	the date of fi must be specifie	lling:	to date of filing o	(0)	ptional) after filing) Pursa	uant to 605 0207 (
Note: If the date inserted in th	is block does n	ot meet the applic	able statutory fi	ling requirements,	this date will n	ot be listed as t
document's effective date on the	he Department	of State's records	•			
the record specifies a dela			t an effective	e time, at 12:0	1 a.m. on th	e earlier of:
The 90th day after the	record is the	eo.				
JULY 21		2017				
Dated			··········			
	1					
	Signature o	of a member or auth	orized representat	ive of a member	 	
DIEGO MATUS	· ·		-			

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