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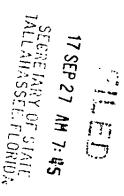
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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Father and Son Tampa Appliances L.L.C. Name of Limited Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for filling. Please return all correspondence concerning this matter to the following:
Jennie M. De La Torre Name of Person
Father and Son Tampa Appliances LLC
3805 tower rd unit 202
Tampa FL 33614 Cit/State and Zip Code Dennie de latorre 300 amail com E-mail address: (to be used for future annual report notification)
E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call:
Jennie M. De Catorre at (786) 908-4683 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
S25.00 Filing Fee Scrifficate of Status Scriffied Copy (additional copy is enclosed) S25.00 Filing Fee Scriffied Copy (additional copy is enclosed) S60.00 Filing Fee, Certified Copy (additional copy is enclosed)
MAILING ADDRESS: STREET/COURIER ADDRESS:

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

Н

Father a	nd Son Tal ted Liability Compai (A Florida Limited L	ov as it now appears on or			
The Articles of Organization for this Limited L	0625	were filed onOS	105/2017	_ and assigned	
This amendment is submitted to amend the following	owing:				
A. If amending name, enter the new name of	f the limited liabi	lity company here:			
The new name must be distinguishable and contain the	words "Limited Liabili	ty Company," the designati	ion "LLC" or the abbrev	viation "L.L.C."	
Enter new principal offices address, if appli (Principal office address MUST BE A STRE				17 SEP	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	BOX)		SSEE. FLORID	1 ED	
B. If amending the registered agent and registered agent and/or the new registered of			records, enter the	name of the ne	<u>:w</u>
Name of New Registered Agent:	Alfredo	Armando	De La To	one	
New Registered Office Address:					
		Enter Florida stre			
		City	, Florida	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> **Address** Type of Action Jennie M. Delatorre 3805 towerrd unit Owner ☐ Change Owner Alfredo A. Delatore 3805 towerrd, 202 □ Remove ☐ Change □ Add ☐ Remove ☐ Change □ Add □ Remove _□ Change □ Add □ Remove _□ Change _□ Add _□ Remove Change

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ective date, if other than the date of filing:	(optional)
effective date is listed, the date must be specific and cannot be prior to date: If the date inserted in this block does not meet the applicable	
rument's effective date on the Department of State's records.	statutory triang requirements, this date with not be instead
record specifies a delayed effective, date, but not an	n effective time, at 12:01 a.m. on the earlier
he 90th day after the record is filed.	
cd 09-25-2017,,	
Signature of a member or authorized Alfredo A De Later (P Typed or printed na	d representative of a member
Signature of a memori of additionact	i representative of a member

Page 3 of 3

Filing Fee: \$25.00