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(Re	equestor's Name)	·
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COVER LETTER

Divi	sion of Corp	porations		
	681 Tacos I			
		Name of Lim	ited Liability Company	
The enclosed	Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return	all correspo	ndence concerning this matter	to the following:	
		Eric Sindone		
			Name of Person	
		681 Tacos LLC		
		<u>-331</u>	Firm/Company	
		425 Greene St		
			Address	
		Key West, Florida 33040		
		amigosstpete@gmail.com	City/State and Zip Code	
			to be used for future annual report notific	cation)
For further in	formation co	oncerning this matter, please ca		
Eric Sindone	i.		305 395-9535	
	Name of	Person	at () Area Code Daytime	Telephone Number
• • • • • • • • • • • • • • • • • • • •	1 18 4	6 No. 3		
Enclosed is a	check for th	ie following amount:		
■ \$25.00 F	iling Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

TO:

Registration Section

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

	681 Tacos LLC		
The Articles of Organization for this Limited Liability Company were filed on	(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our records.) Liability Company)	
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 "LLC." 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 registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address	(Name of the Limited Liability Compared Articles of Organization for this Limited Liability Compared 1.17000211082 In amendment is submitted to amend the following: If amending name, enter the new name of the limited I are new name must be distinguishable and contain the words "Limited Lanter new principal offices address, if applicable: Principal office address MUST BE A STREET ADDRESS of the new mailing address, if applicable: Mailing address MAY BE A POST OFFICE BOX If amending the registered agent and/or registered agent and/or the new registered office address. Name of New Registered Agent:		and assigned
The new name must be distinguishable and contain the words "Limited Liability Company." the designation "LLC" or the abbreviation "LLC." 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) 3. If amending the registered agent and/or registered office address on our records, enter the name of the registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address	This amendment is submitted to amend the following:		
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Enter Florida street address	registered agent and/or the new registered office address here		nter the name of the n
Enter Florida street address	V B : 1007		
, Florida	New Registered Office Address:	Enter Florida street address	
City Zip Code		, Florid	a
		City	Zip Code

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, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	HAVERL, SAM J	245 NWLINCOLN CIRCLE N.	
		ST. PETERSBURG, FL 33702	■ Remove
			□ Change
			Add
			Remove
			Change
			Add
			□ Remove
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fective date, if other than the	date of filing	: <u> </u>			(optional)		
an effective date is listed, the date mu tote: If the date inserted in this b	st be specific and ock does not m	cannot be prior to eet the applical	o date of filing o ble-statutory f	r more than 90 da ling requiremer	ys after tiling.) l its, this date w	Pursuant to 605 fill not be liste	.020 ed a
ocument's effective date on the D							
record specifies a delayer		ate, but not	an effectiv	e time, at 12	::01 a.m. o	n the earlie	ero
The 90th day after the rec	ord is filed.						
August 8,		2018					
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Filing Fee: \$25.00