## 217000235157

| (Requestor's Name)                      |
|---|
| (Address)                               |
| (Address)                               |
| (City/State/Zip/Phone #)                |
| PICK-UP WAIT MAIL                       |
| (Business Entity Name)                  |
| (Document Number)                       |
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June 13, 2018

LIANA MARTINEZ, ESQ 11077 BISCAYNE BLVD, STE 209 NORTH MIAMI, FL 33161

SUBJECT: SUPERMARKET TECUN, LLC.

Ref. Number: L17000235157

We have received your document for SUPERMARKET TECUN, 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):

The registered agent must sign accepting the designation.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Octavia L Simmons Regulatory Specialist III

Letter Number: 018A00012313

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

## SUPERMARKET TECUN, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on November 14, 2017 and assigned Florida document number \_\_\_\_\_L17000235157 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 "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 new registered agent and/or the new registered office address here: Hernan R. Lazo Name of New Registered Agent: 1515 NW 27th Avenue New Registered Office Address: Enter Florida street address

## 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.

City

Miami.

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> | Name                      | <u>Address</u>      | Type of Action |
|--------------|---------------------------|---------------------|----------------|
| MGR          | GONZALEZ RIVERA, Arodi M. | 1515 NW 27th Avenue |                |
|              |                           | Miami, FL 33125     | ■ Remove       |
|              |                           |                     | ☐ Change       |
| MGR          | SOLIS VILLEDA, Alyn E     | 1515 NW 27th Avenue | ☐ Add          |
|              |                           | Miami, FL 33125     | ■ Remove       |
|              |                           |                     | □ Change       |
| MGR          | LAZO, Hernan R.           | 1515 NW 27th Avenue | Add Add        |
|              |                           | Miami, FL 33125     | FINE EL        |
|              |                           |                     | <u> </u>       |
| MGR          | QUIROZ, Carlos J.         | 1515 NW 27th Avenue | 3 2 TE DORIDA  |
|              |                           | Miami. FL 33125     | ☐ Remove       |
|              |                           |                     |                |
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| in effective date is listed, th<br>ote: If the date inserted |                    |                        |                       |                  |                   |             |
| ocument's effective date                                     |                    |                        |                       | requirements, un | rance will not be | nstea a.    |
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| record specifies a   |                    |                        | t an effective ti     | me, at 12:01 a   | a.m. on the ea    | ırlier o    |
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|  | 11then             | $\mathcal{K} \omega /$ | orized representative |                  |                   |             |

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00