

L18000058069

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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ALACHUA COUNTY, FLORIDA

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APR 18 2018

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** RAMIREZ BAKERY LLC  
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

IDILIO SANTIAGO RAMIREZ VAZQUEZ

Name of Person

RAMIREZ BAKERY LLC

Firm/Company

625 RANCHERO ROAD APT 3

Address

BELLE GLADE, FL 33430

City/State and Zip Code

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

IDILIO SANTIAGO RAMIREZ VAZQUEZ 561 779-3594  
Name of Person at (Area Code) Daytime Telephone Number

Enclosed is a check for the following amount:

- ☒ \$25.00 Filing 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:**

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

## RAMIREZ BAKERY LLC

The Articles of Organization for this Limited Liability Company were filed on MARCH 05, 2018 and assigned  
Florida document number L18000058069

**A. If amending name, enter the new name of the limited liability company here:**

**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:**

Name of New Registered Agent:

**New Registered Office Address:**

Enter Florida street address

**, Florida**

City:

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>	<u>Address</u>	<u>Type of Action</u>
AMBR	ICELA GUZMAN LOPEZ	625 RANCHERO ROAD APT 3	<input checked="" type="checkbox"/> Add
		BELLE GLADE, FL 33430	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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APR 15 2014  
CLASSE, FLORIDA

**D. If amending any other information, enter change(s) here:** *(Attach additional sheets, if necessary.)*

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AMEMBASSY LONDON

18 APR 1967 049  
HALL COUNTY STATION,  
TALLAHASSEE, FLORIDA

**E. Effective date, if other than the date of filing:** APRIL 11, 2018 (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

Dated APRIL 11 2018

Signature of a member or authorized representative of a member

IDILIO SANTIAGO RAMIREZ VAZQUEZ

Typed or printed name of signee