## 49000014415

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## **COVER LETTER**

Division of Cor	porations		
SUBJECT:	Fire Cater Name of Lim	ited Lability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
		Name of Person	
		Firm/Company	
	8547	NW 140 Th Ter	#703
	Mia	City/State and Zip Code  Of The Garay Grow to be used for future annual report notif	0
	E-mail address: (	to be used for future annual report noty	(). CON lication)
For further information c	concerning this matter, please ca	all:	
Maribel Name o	M Person		730–7 c Telephone Number
Enclosed is a check for the	he following amount:		
□ \$25.00 Filing Fee	S30.00 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



March 27, 2019

MARIBEL CRUZ 8547 NW 140TH TER #703 MIAMI, FL 33016

SUBJECT: FIRE CATERING LLC Ref. Number: L18000074415

We have received your document and check(s) totaling \$50.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must contain the words "Limited Liability Company," the abbreviation "L.L.C.", or the designation "LLC". The following suffixes are no longer acceptable: "Limited Company," "L.C.," "Ltd.," and "Co."

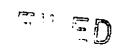
Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Claretha Golden Regulatory Specialist II

Letter Number: 819A00006107

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



Fire Catering (Name of the Limited Liability Compar (A Florida Limited L	LLC 2019 STO 11 PM 5: 42
( <u>Name of the Limited Liability Compa</u> (A Florida Limited L	ny as it now appears on our records.) Liability Company)
The Articles of Organization for this Limited Liability Company Florida document number <u>L 180000 74415</u> .	were filed on $03/22/2018$ and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabi	lity company here:
Maribel Cruz Almaguer The new name must be distinguishable and contain the words "Limited Liabile	- LLC
The new name must be distinguishable and contain the words "Limited Liabili	
Enter new principal offices address, if applicable:	6175 NW 1531d St. #400
(Principal office address MUST BE A STREET ADDRESS)	Miami Lakes, Fl. 33014
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)	1210 NW 83'd Way Pembroke Pines, Fl. 33024
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here	
Name of New Registered Agent:	thanse of Mismi
New Registered Office Address: 36	Enter Florida street address
Mic	Mi Slorida 33 1 3 %  City Zip Code
New Degistered Agent's Signature if changing Degistered Agent-	

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
MGR	Rhiannon Almaguer	259 E. 12 Street	
	· ·	259 E. 12 street Hialeah, FL. 33010	Remove
			Change
			☐ Remove
			Remove
			Change
			Remove
			Change
			□ Remove
			Change
			□ Remove
			Change

. If amending a	ony other information, enter change(s) here: (Attach additional sheets, if necessary.)
<del>.</del>	
<u></u>	
<del></del>	
<del></del>	
<del></del>	
	e. if other than the date of filing: (optional)
(If an effective dat Note: If the dat	e, if other than the date of filing:
the record sp  The 90th o	becifies a delayed effective date, but not an effective time, at $12:01\ a.m.$ on the earlier of day after the record is filed.
Dated 09	mll
	Signature of a member or authorized representative of a member
	Maribel Cruz  Typed or printed name of signee

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Filing Fee: \$25.00