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COVER LETTER

Division of Co	rporations		
MARIBEI SUBJECT:	CRUZ ALMAGUER LLC		
<u></u>	Name of Lin	mited Liability Company	
The enclosed Articles of	Amendment and fec(s) are sul	bmitted for filing.	
Please return all corresp	ondence concerning this matter	r to the following:	
	JACQUELINE M	I ROSADO	
		Name of Person	
	TAX HOUSE MIA	MI	
		Firm/Company	
	301 NE 79TH STRI	EET #2	
•	 -	Address	
	MIAMI FL 3313	38	
	JACQUI@TAXHOUSEMI	City/State and Zip Code IAMI.COM	19.0
	E-mail address: (to be used for future annual report notif	ication)
For further information c	oncerning this matter, please c	all:	
JACQUI ROSADO		786 615-2009	
Name o	f Person	at () Area Code Daytime	Telephone Number
Enclosed is a check for th	ne 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:

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



October 23, 2019

JACQUELINE M ROSADO 301 NE 79TH STREET #2 MIAMI, FL 33138

Ref. Number: L18000074415

We have received your document for, however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$25.00.

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.

Letter Number: 519A00021797

Claretha Golden Regulatory Specialist II

www.sunbiz.org



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.," "LC.," "LC.,"

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

Division of Corporations PA BAY 6207 M-11-1

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Maribel Cruz Almaguer 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 03/22/2018 and assigned Florida document number L18000074415

This amendment is submitted to amend the following:

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

MARIBEL ALMAGUER LLC

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:

New Registered Agent's Signature, if changing Registered Agent:

Name of New Registered Agent:

New Registered Office Address:

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

If Changing Registered Agent, Signature of New Registered Agent

Enter Florida street address

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

<u>Title</u>	<u>Name</u>	Address	Type of Action
			D Add
			П Remove
			Change
			🗆 Add
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(If an eff <u>Note:</u>	ive date, if other than the defective date is listed, the date must be If the date inserted in this blockent's effective date on the Dep	be specific and cannot be prior ork does not meet the applic	able statutory filing requ		
	cord specifies a delayed 90th day after the recor		ot an effective time,	at 12:01 a.m. on the e	arlier of:
Dated	OCTOBER 10	2019	- 0//		
	e	ignature of a member or auth	orized representative at a	ambar	_
	3	ignature of a member of auth	orized representative of a fi	emoci	

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00