## 1180000 87567

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



600325839106

U3/11/19--U1U29--UU3 \*\*35.UU

FILED
2019 MARILE A & IR

MAR 2 2 2013 T. LEMIEUX

## **COVER LETTER**

Div	vision of Cor	porations	*	
SUBJECT:		-TORITO, LLC		
		Name of Lim	ited Liability Company	
The enclose	d Articles of .	Amendment and fee(s) are sub	mitted for filing.	
Please return	i all correspo	ndence concerning this matter	to the following:	
		Claudia Perez		
			Name of Person	
		TACOS EL - TORITO, LI		
			Firm/Company	
		2500 E RD 92		
			Address	<del></del> .
		Lakeland, Florida 33801		
		tacos_eltorito@aol.com	City/State and Zip Code	
		E-mail address: (	to be used for future annual report notifi	cation)
For further i	nformation co	oncerning this matter, please ea	all:	
Claudia Per	ex		863 934-2743	
	Name of	Person	at () Area Code Daytime	Telephone Number
Enclosed is	a check for th	e following amount:		
□ \$25.00 I	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)

Registration Section

TO:

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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

TACOS EL-TORITO, LLC

FILED

(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 I	Liability Company	were filed on 04/06/2018	2019 MAR 1 8 A 9 16 and assigned SECRETARY OF STATE
Florida document number 1.18000087567	·		SECRETARY OF STATE TALLAHASSEE, FLORIDA
This amendment is submitted to amend the fol	lowing:		
A. If amending name, enter the new name	of the limited liab	ility company here:	
The new name must be distinguishable and contain the	words "Limited Liabi	lity Company," the designation "Li	.C" or the abbreviation "L.L.C."
Enter new principal offices address, if appli	cable:	TACOS EL - TORITO, LLO	
(Principal office address MUST BE A STRE.	ET ADDRESS)	2500 E RD 92	
		LAKELAND, FL 33801	
Enter new mailing address, if applicable:		Claudia Percz	
(Mailing address MAY BE A POST OFFICE	BOX)	1813 E Fern Rd	
		Lakeland, Fl 33801	
B. If amending the registered agent and registered agent and/or the new registered of			ds, enter the name of the new
Name of New Registered Agent: Eddie Joe Bryan  New Registered Office Address: 1905 NW 25th		nt, Jr.	
		Enter Florida street addi	ress
	Ocala		Florida 34475
		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 Agent Agent, Signature of Yew 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

Title Title	Name	Address	Type of Action
AMBR	Cłaudia Perez	2500 E Rd 92 Lakeland, FL 33801	<b></b>
*		1905 NW 25th Ave Ocala Fl	<b>⊿</b> Add
		34475 (Eddie J Bryant)	■ Remove
			Change
<del></del>			
			☐ Remove
			Change
			□ Remove
			Change
			Add
			Remove
			Change
			□ Add
			Remove
			☐ Change
			☐ Remove
			Change

D. If amen	ding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
•	
. —	
<del></del>	
_	
	······································
	03/05/2019
(If an effective Note: 1	tive date, if other than the date of filing:
If the reco	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: 90th day after the record is filed.
Dated _	March 05  Claude to post
	Signature-of-a member or authorized representative of a member
	Claudia Perez  Claudia Perez  Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00