## 718000119398

Office Use Only



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Other committees with the committee of t

2023 FEB - 1 AB 9: 17

TO:

Registration Section\*

## COVER LETTER

Division of Corp	porations			
SUBJECT: LOS	GUGOS LLC- Name of Limi	_18000119398 ited Liability Company		
The enclosed Articles of a	Amendment and fee(s) are sub-	mitted for filing.		
Please return all correspon	ndence concerning this matter	to the following:		
	LUIS	Name of Person Firm/Contenty		
	LSLO3 WALL	DEU WOODS DR. Address		2022 5-5
	ORLANDO	City/State and Zip Code		ORE ALL
				-
	E-mail address: (	SLLC ( O O O T LOOK - CC to be used for future annual report no	tification)	
For further information co	oncerning this matter, please co	all:		2023 FEB -1 AH 9: 17 SEURETHALT TO SELECT
LUIS_ART	FAGA	at, 407,54503	253	
Name of	Person	at 407 5450' Area Code Dayii	me Telephone Number	_
Enclosed is a check for th	e following amount:			
\$25.00 Filing Fee      \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Certificate of Certified Cop (additional copy	Status & oy

Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	uny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number 170011939k	were filed on OS-1HZO1	and assigned
This amendment is submitted to amend the following:		
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 Liabil	lity Company," the designation "LLC" or the	ne abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		20131 50 C
		FEB -1
Enter new mailing address, if applicable:		760 E
(Mailing address MAY BE A POST OFFICE BOX)		The same of the sa
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, <u>enter the</u>	
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	, Florid	a
	City	ziji Come

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.

and address of each person being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	1 ype of Action
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ective date, if other than effective date is listed, the date e: If the date inserted in thi ument's effective date on the	must be specific and car s block does not mee	inot be prior to t t the applicabl	late of filing or more statutory filing	(option of the control of the contro	filing.) Purs	suant to 605.0 not be listed
ord specifies a delayed effe filed.	etive date, but not an	effective time	, at 12:01 <b>a</b> .m. on	the earlier of: (b	) The 90t	h day after t
ed <u>SEPTIEMBRE</u>	15	2022				
	3		ed representative of			