

L18000129335

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

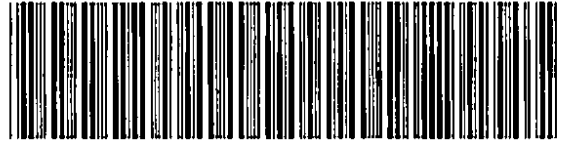
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



000316642460

08/15/18--01003--029 **25.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
18 AUG 13 AM 9:25

N COOPER

AUG 16 2018

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Sabores de Colombia in Jax, 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:

Kelly B. Mathis, Esq.

Name of Person

K. B. Mathis, PA

Firm/Company

12276 San Jose Blvd., Suite 126

Address

Jacksonville, FL 32223

City/State and Zip Code

kmathis@mathislaw.net

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

For further information concerning this matter, please call:

Kelly B. Mathis

904

880-5114

at (_____) _____

Name of Person

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

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

Sabores de Colombia in Jax, 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 5/23/2018 and assigned Florida document number 118000129335.

This amendment is submitted to amend the following:

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

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

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)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATION
18 AUG 13 AM 9:25

**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

cin

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>
MGR	Marco Sayan	9825 San Jose Blvd., Suite 20	<input checked="" type="checkbox"/> Add
		Jacksonville, FL 32257	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Jany Dias de Villegas	7566 Sunnysdale Ln	<input checked="" type="checkbox"/> Add
		Jacksonville, FL 32256	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Delicias Colombianas, LLC	c/o Cristina Osorio	<input checked="" type="checkbox"/> Add
		3451 Saland Way, Apt. 1022	<input type="checkbox"/> Remove
		Jacksonville, FL 32246	<input type="checkbox"/> Change
P	Cesar Ariel Sayan	9825 San Jose Blvd Suite 20	<input type="checkbox"/> Add
		Jacksonville, FL 32257	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
VP	Andrew Garzon	9825 San Jose Blvd., Suite 20	<input type="checkbox"/> Add
		Jacksonville, FL 32257	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
	Andrew Garzon		<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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

97:5 (12)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
18 AUG 13 AM 9:25

E. Effective date, if other than the date of filing: _____ (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 x 8/10/18 .

* Andrew Sharp

Signature of a member or authorized representative of a member

x Andrew Garzon

Typed or printed name of signee