

L18000151186

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

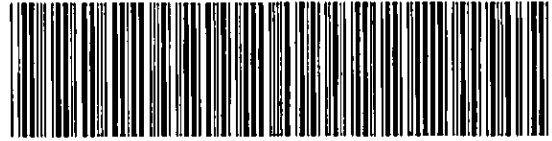
(Business Entity Name)

(Document Number)

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18 JUN 28 AM 10:07  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

N COOPER

JUN 29 2018

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Little Foot & Princess Investments, LLC

\_\_\_\_\_  
Name of Limited Liability Company

The enclosed Articles of Amendment and fees are submitted for filing.

Please return all correspondence concerning this matter to the following:

JENNIE TEMPRANA BOCANEGRA

\_\_\_\_\_  
Name of Person

LITTLE FOOT & PRINCESS INVESTMENTS, LLC

\_\_\_\_\_  
Firm/Company

701 EAST 24 STREET

\_\_\_\_\_  
Address

HIALEAH, FLORIDA 33013

\_\_\_\_\_  
City/State and Zip Code

HFSPRINKLERS@HOTMAIL.COM

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

For further information concerning this matter, please call:

JENNIE TEMPRANA BOCANEGRA

305 3053861  
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**

Little Foot & Princess Investments, 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 6/20/2018 and assigned  
Florida document number L18000151186.

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)

SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
18 JUN 28 AM 10:07

**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

*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 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	Jennie Temprana Bocanegra	701 EAST 24 STREET	<input checked="" type="checkbox"/> Add
		HIALEAH, FLORIDA 33013	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Raimundo Bocanegra Chirino	701 EAST 24 STREET	<input checked="" type="checkbox"/> Add
		HIALEAH, FLORIDA 33013	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
P	Jennie Temprana Bocanegra	701 EAST 24 STREET	<input type="checkbox"/> Add
		HIALEAH, FLORIDA 33013	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
VP	Raimundo Bocanegra Chirino	701 EAST 24 STREET	<input type="checkbox"/> Add
		HIALEAH, FLORIDA 33013	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AR	Jennie Temprana Bocanegra	701 EAST 24 STREET	<input type="checkbox"/> Add
		HIALEAH, FLORIDA 33013	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<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.)*

THE  
SECRETARY OF THE  
DIVISION OF CONSERVATION

18 JUN 28 AM 10:07

**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 JUNE 26 2018

2018

Jennie Thompson Beany

Signature of a member or authorized representative of a member

JENNIE TEMPRANA BOCANEGRA

Typed or printed name of signee