## 118000/64598

(Re	questor's Name)	
(Ad	dress)	
	dress)	<u></u>
(Cit	y/State/Zip/Phone	<del>= #)</del>
(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:		
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
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## **COVER LETTER**

то:		istration Sec ision of Corp			
SHD	IECT:	Bonilla Reco			
SUB	ice.		Name of Lim	ited Liability Company	
The e	nclosed	Articles of A	Amendment and fee(s) are sub-	mitted for filing.	
Pleas	e return	all correspor	ndence concerning this matter	to the following:	
			Edward M Bonilla Arcabas	scio	
				Name of Person	
				Firm/Company	
			21267 Bella Terra Blvd		
				Address	
			Estero, FL 33928	0	
			ebanyc2@gmail.com	City/State and Zip Code	
е т		- C		to be used for future annual report notific	ation)
			oncerning this matter, please ca		
Edwa	ard M F	Bonilla Arcab Name of		347 405-4869at ()Area Code Daytime	Telephone Number
Enclo	osed is a	check for th	e following amount:		
<b>■</b> S	25.00 F	iling 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

FILED

Bonilla Records, LLC

2018 NOV 19 AM 10: 07

(Name of the Limite	A Florida Limited Liability Company)	TALLAHASSEE, FL
The Articles of Organization for this Limited Lia Florida document number 1.18000164598	ability Company were filed on July 9, 2018	and assigned
This amendment is submitted to amend the follo	wing:	
A. If amending name, enter the new name of	the limited liability company here:	
Endeavor Vending Services, LLC		
The new name must be distinguishable and contain the wo	ords "Limited Liability Company," the designation "I	JLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applica	able:	
(Principal office address MUST BE A STREE	T ADDRESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE I	<u>BOX)</u>	
B. If amending the registered agent and/or the new registered off  Name of New Registered Agent:		ords, enter the name of the new
New Registered Office Address:		
	Enter Florida street add	dress
		FloridaZip Code
	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 = M $AMBR = A$	lanager authorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
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Effective date, if other than the (If an effective date is listed, the date me	e date of filing:	or to date of filing or more th	(optional) an 90 days after filing.) Pursu	ant to 605.03
Note: If the date inserted in this be document's effective date on the I	lock does not meet the appl	icable statutory filing req	uirements, this date will no	ot be listed
document's effective date on the f	repartment of state 3 record			
the record specifies a delaye		ot an effective time	, at 12:01 a.m. on th	e earlier
The 90th day after the re	cord is filed.			
November 17	2018			
Dated	1 11 8	 . 22 1	2	
Edwar -	19 5	Ila wic	alascio	

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00