L18000185041

(Re	equestor's Name)	
(Ad	dress)	
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(Cit	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
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T. MATTHEWS

JAN 10 2022



December 8, 2021

OLGA ROMAS 12355 COLLIER BLVD STE H NAPLES, FL 34116

SUBJECT: TAQUERIA LOS MARIACHIS,LLC

Ref. Number: L18000185041

We have received your document for TAQUERIA LOS MARIACHIS, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a FLORIDA PROFIT CORP, but your entity is a FLORIDA LLC. Please complete and return the enclosed blank form(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 421A00029481

Tekayla T Matthews OPS

www.sunbiz.org

COVER LETTER

TO: Registration S Division of Co			
	os Mariachis LLC		
SUBJECT:	Name of Lin	ited Liability Company	2021 <u>05</u> 1 23 £11 8: 05
The enclosed Articles o	Amendment and fee(s) are sub	mitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	Olga Ramos		
		Name of Person	
	Freedom Tax Services of S	SWFL Corp	
		Firm Company	
	12355 Collier Blvd Ste H		
		Address	
	Naples Florida 34116		
	olgaramos0524@gmail.con	City/State and Zip Code	
	- · · · · · · · · · · · · · · · · · · ·	to be used for future annual report notif	ication)
For further information	concerning this matter, please c	all;	
Olga Ramos		239 455-6011 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 Addre Registration Division of P.O. Box 63 Tallahassec,	Section Corporations 27	Street Address: Registration Sec Division of Corp The Centre of T 2415 N. Monroc Tallahassee, FL	porations allahassee : Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Taqueria Los Mariachis LLC

21 DEC 20 PH 4: 27

(Name of the Limited Liability Con (A Florida Limit	npany as it now appears on e red Liability Company)	our records.)
The Articles of Organization for this Limited Liability Compa $\frac{L18000185041}{L18000185041}$.	nny were filed on <u>08/02/20</u>	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited li	iability company here:	
The new name must be distinguishable and contain the words "Limited Li	iability Company," the designa	ation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)	<u> </u>	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
		d
B. If amending the registered agent and/or registered offic agent and/or the new registered office address here:	ce address on our record	as, enter the name of the new register
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida st	reet 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 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>	Address	Type of Action
MGR	Alejandro Gonzalez	8355 McDaniel Dr.	CAdd
		North Fort Myers, FL	
		33917	
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			□ Change
			□Add
			□Remove
			Change
			
			□Remove
			: Change
			□Remove
			□Remove
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	specific and cannot be prior to o	date of filing or more than 90	(optional)) days after filing.) Pursuant to empty, this data will not be	505.0207
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rective date, if other than the date in effective date is listed, the date must be state: If the date inserted in this block comment's effective date on the Department's effective date on the Department's filed. The department of the date inserted in this block comment's effective date on the Department's effective date on the Department's filed. The date inserted in this block comment is effective date on the Department's effective date of the date in this block comment is effective date on the Department's effective date of the Dep	tment of State's records. e, but not an effective time	e, at 12:01 a.m. on the ear	rlier of: (b) The 90th day a	