L19000032073

Office Use Only



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COVER LETTER

TO:		ation Section of Corpor								
ot in m		aria's New (Colombian Cuisine, LLC							
SUBJE	.CI:	Name of Limited Liability Company								
The end	closed Art	icles of Am	endment and fee(s) are sub-	mitted for filing.						
Please i	return all c	orresponde	nce concerning this matter	to the following:						
				Diana M Ortega						
				Name of Person						
Firm/Company 9860 NW 88 Street										
		· ·								
		Address								
	Doral, FL 33178									
	City/State and Zip Code diorza09@hotmail.com									
		-	E-mail address: ()	to be used for future annual i	report notification)					
For fur	ther inforc	nation conc	erning this matter, please co	all:						
	Diana	M. Ortega		at ()	5-0126					
		Name of Pe	rson	Area Code	Daytime Telepho	ne Number				
Enclose	ed is a che	ck for the fo	ollowing amount:							
□ \$25	5.00 Filing	; Fee l	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy tadditional copy is encl		\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)				

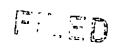
MAILING ADDRESS:

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



2019 MAR 20 PM 2: 47

	•	- 111 2:4/	
MARIA'S NEW COLON	ABIAN CUISINE LLC 📑 🖰 🚉		
(<u>Name of the Limited Liability Compa</u> (A Florida Limited I	ny as it now appears on our records.). Liability Company)	-2, FL	
The Articles of Organization for this Limited Liability Company Torida document number <u>L19000032073</u> ,	were filed on 01/31/2019	and assigned	
his amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	ility company here:		
he new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "LLC" or the	abbreviation "L.L.C."	
Enter new principal offices address, if applicable:	9860 NW 88 STREET		
Principal office address MUST BE A STREET ADDRESS)			
	DORAL, FL 33178		
Enter new mailing address, if applicable:		····	
Mailing address MAY BE A POST OFFICE BOX)	<u> </u>		
 If amending the registered agent and/or registered of registered agent and/or the new registered office address here 	·	er the name of the new	
Name of New Registered Agent:			
New Registered Office Address:	Enter Florida street address		
	Enter r tortaa street address		

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.

City

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>	Type of Action
AMBR	CARLOS SULSONA	620 SE 14 STREET CAPE CORAL, FL 33990	<u></u> ≣ Add
			□ Remove
			☐ Change
AP	CARLOS SULSONA	620 SE 14 STREET CAPE CORAL, FL 33990	
			■ Remove
			Change
AMBR	DIANA M. ORTEGA	9860 NW 88 STREET DORAL, FL 33178	∃ Add
			☐ Remove
			□ Change
			Add
			Remove
			Change
			
			Remove
			Change
			Remove
			☐ Change

	-	(Attach additional sheets, if necessary.)
· · ·		
		
	-	
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		<u> </u>
E. Effective date, if other than the (If an effective date is listed, the date muse Note: If the date inserted in this blackment's effective date on the D	lock does not meet the applicab	(optional) date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3 de statutory filing requirements, this date will not be listed as the
f the record specifies a delayed b) The 90th day after the rec		an effective time, at 12:01 a.m. on the earlier of:
Dated MARCH 15	2019	,
	nd:	
	Signature of a member or authorize	zett representative of a member
_	JIANA M. ORTEGA	

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00