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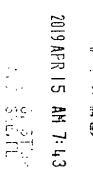
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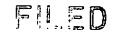
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SURIF	CASA FRI	AS MEXICAN CUSINE LLC		
,, O 1312.		Name of Lim	ited Liability Company	
The encl	osed Articles of	Amendment and fee(s) are sub	mitted for filing.	
			-	
		RENEE ROSARIO		
		RCR CONSULTING GRO	Name of Person	
			Firm/Company	
		887 SR 436	Name of Limited Liability Company diment and fee(s) are submitted for filing. e concerning this matter to the following: ENEE ROSARIO Name of Person ER CONSULTING GROUP LLC Firm/Company 7 SR 436 Address Address Address Address Asselberry FL 32707 City/State and Zip Code re-rosario@americantaxpayroll.com E-mail address: (to be used for future annual report notification) ing this matter, please call: Area Code Daytime Telephone Number Dowing amount: S00.00 Filing Fee & \$60.00 Filing Fee,	
		CASSELBERRY FL 3270		
		rence.rosario@americantax		
ا العام الكام ا			·	ication)
	ROSARIO	-	407 461-8015	
	Name o	f Person	at () Area Code Daytime	: Telephone Number
Enclosed	l is a check for th	ne following amount:		
\$25 .+	00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status		☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327

STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)



2019 APR 15 AM 7:43

The Articles of Organization for this Limited Liability Company Florida document number $\frac{L19000081374}{L19000081374}$.	were filed on MARCH 25,2019	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabi	lity company here:	
The new name must be distinguishable and contain the words "Limited Liabili	ity Company," the designation "LLC" or the	e abbreviation "L.L C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		

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:

_	City	Zip Code
		, Florida
New Registered Office Address.	Enter Florida street ac	ldress
New Registered Office Address:		
Name of New Registered Agent:		

New Registered Agent's Signature, if changing Registered Agent:

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

CASA FRIAS MEXICAN CUISINE LLC

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>	Address	Type of Action
MGR	JOSE J FRIAS	510 PONDEROSA DR ST CLOUD, FL 34769	Add
			≅ Remove
	JORGE J FRIAS	510 PONDEROSA DR	E Change
MGR		ST CLOUD, FL 34769	
			□ Remove
			Change
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(If an effecti	date, if other than the we date is listed, the date mus he date inserted in this blo	at be specific and cannot be	prior to date of filing or	more than 90 days a	ptional) ifter filing.) Pursuant t	o 605.0207
document	's effective date on the De	epartment of State's rec	cords.	mg requirements,	this date will not be	e usica as
If the recor	d specifies a delayer	d offoctive data by	it not an affactive			4.
(b) The 90	d specifies a delayed oth day after the rec	ord is filed.	it not an effective	time, at 12:0	i a.m. on the e	arlier o
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Filing Fee: \$25.00