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FILED 19 JUL 15 PH 12: 31

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## **COVER LETTER**

Div	ision of Corp	orations	•				
SUBJECT:		AYA BAR AND GRILL RES	TAURANT, LLC				
		Name of Limi	ted Liability Company				
The enclosed	d Articles of A	Amendment and fee(s) are sub-	mitted for filing.				
Please return	all correspon	idence concerning this matter (	to the following:				
	MARIA A NAJERA						
	Name of Person						
			Firm/Company	<del></del>			
		2841 S. W. NEVERSAIL STREET					
			Address				
			ARCADIA, FLORIDA 34266				
			City/State and Zip Code angy74girl@yahoo.com				
		E-mail address: (1	to be used for future annual report notifi	ication)			
For further i	nformation co	oncerning this matter, please co	-				
Maria Ange	la Najera		863 244-3609				
	Name of	Person	Area Code Daytime	Telephone Number			
Enclosed is	a check for th	e following amount:					
\$25.00	Filing Fcc	☐ \$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

TO:

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

RIVERA MAYA BAR AND GRILL RESTAURANT, LLC		
(Name of the Limited Liability Company as it now appea (A Florida Limited Liability Company)	rs on our records.)	
he Articles of Organization for this Limited Liability Company were filed on	06/12/2019	and assigned
lorida document number		
his amendment is submitted to amend the following:		
. If amending name, enter the new name of the limited liability company h	ere:	
he new name must be distinguishable and contain the words "Limited Liability Company," the	designation "LLC" or the	abbreviation "L.L.C."
Inter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRESS)		
. <u>.                                   </u>		
inter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		19 S:
		<u> </u>
		<u> </u>
3. If amending the registered agent and/or registered office address o	a our records, <u>ente</u>	r the name of th
3. If amending the registered agent and/or registered office address o	a our records, <u>ente</u>	r the name of th
3. If amending the registered agent and/or registered office address or registered agent and/or the new registered office address here:	a our records, <u>ente</u>	
I, If amending the registered agent and/or registered office address o	a our records, <u>ente</u>	r the name of th
8. If amending the registered agent and/or registered office address or egistered agent and/or the new registered office address here:  Name of New Registered Agent:  New Registered Office Address:		r the name of th
B. If amending the registered agent and/or registered office address or registered agent and/or the new registered office address here:  Name of New Registered Agent:  New Registered Office Address:	a our records, <u>ente</u> orida street address Florida	r the name of th

## 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 add or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR4	JUAN ANTONIO FUENTES VAZQUEZ	225 GLADYS AVENUE NEWARK, OHIO 43055	B Add
		<del></del>	□ Remove
			Cl Change
			□ Remove
			☐ Change
			Dadd
			☐ Remove
		<del></del>	Change
	······································		
			□ Remove
			☐ Change
<del></del>			D Add
			C Remove
		<del>, , , , , , , , , , , , , , , , , , , </del>	Change
<del></del>			Add
			☐ Remove
			☐ Change

11 sittenania and ocues to	formation, enter change(s)	uere. (Alexan an	шилай <b>ме</b> сы, у т	acasary.)
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Note: If the date inserted in	date must be specific and cannot be this block does not meet the apon the Department of State's reco	plicable statutory i	or more than 90 days at	ntional) fler filing.) Pursuant to 605.021 this date will not be listed a
ne record specifies a d The 90th day after t	elayed effective date, but he record is filed.	not an effectiv	e time, at 12:01	La.m. on the earlier
Dated	, 2019	<del></del> -		
	Maria Angelo Signature of a member or	n Nazera	time of a member	
	MARIA A. NAJERA	ovenera usam popi GDGIM	mart vi a limelati	
		printed name of signe	<del></del>	<del></del>

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Filing Fee: \$25.00