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(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
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up LLC	•	
Name of Lim	ited Liability Company	
*Amendment and fee(s) are sub	mitted for filing.	
ondence concerning this matter	to the following:	
Skyler Gearin		
	Name of Person	
Fiesta Group LLC		
Name of Person		
	Address	
Bradenton, FL, 34208		
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		(fication)
of Person	Area Code Daytim	ne Telephone Number
the following amount:		
	Certified Copy	Certificate of Status & Certified Copy
		ction
	Name of Lim 'Amendment and fee(s) are subsondence concerning this matter Skyler Gearin Fiesta Group LLC 3103 Pine Street Bradenton, FL, 34208 fiestagroupskyler@gmail.ee E-mail address: (concerning this matter, please e	Name of Limited Liability Company 'Amendment and fee(s) are submitted for filing. Independence concerning this matter to the following: Skyler Gearin Name of Person Fiesta Group LLC Firm/Company 3103 Pine Street Address Bradenton, FL, 34208 City/State and Zip Code fiestagroupskyler@gmail.com E-mail address; to be used for future annual report not concerning this matter, please call: at (

Registration Section Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

TO:

Registration Section

Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Fiesta Group LLC	
(Name of the Limited Liability Company a (A Florida Limited Liabi	is it now appears on our records.) slity Company)
The Articles of Organization for this Limited Liability Company wer	re filed on and assigned
lorida document number 1.19000182682	
his amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability	/ company here:
he new name must be distinguishable and contain the words "Limited Liability C	Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
Principal office address MUST BE A STREET ADDRESS)	2020
_	DEC F
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inter new mailing address, if applicable:	
Mailing address MAY BE A POST OFFICE BOX)	<u> </u>
	26
 If amending the registered agent and/or registered office addigent and/or the new registered office address here: 	ress on our records. <u>enter the name of the new registe</u>
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	, Florida

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 = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	Taylor Gearin	3019 Pine Street, Bradenton, FL, 34208	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
			■Remove
			□ Change
AMBR	Richard Gearin	3019 Pine Street, Bradenton, FL, 34208	= Add
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ffective date, if other than t an effective date is listed, the date i	he date of fil	ing:		and then 100 d	_ (optional)	A Pursuant to 605 f	1207
an effective date is listed, the date is listed. If the date inserted in this ocument's effective date on the	: block does no	of meet the applic	able statutory	ithing requirement	nts, this date	will not be listed	d as
record specifies a delayed effect l is filed.	rtive date, but i	not an effective t	ime, at 12:01 a	.m. on the earli	er of: (b) - Ti	ne 90th day after	the
December 4		2020					
	1 /	2020 COV Y					
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Typed or printed name of signee