L19000219370

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COVER LETTER

TO: Registration Section

Division	of Corporatio	ns		
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SUBJECT:		Name of Lim	ited Liability Company	
PHESTA AZUL TEQUILA HOUSE LLC Name of Limited Liability Company the enclosed Articles of Amendment and fee(s) are submitted for filling. lease return all correspondence concerning this matter to the following: RENE ROSARIO Name of Person AMERICAN TAX & PAYROLL SERVICES LLC Firm*Company 887 STATE ROAD 436 Address CASSELBERRY, FL 32707 City/State and Zip Code rence, rosario(gamericantaxpayroll.com) B-mail address: (to be used for fluure annual report notification) or further information concerning this matter, please call: RENE ROSARIO Name of Person Area Code Daytime Telephone Number neclosed is a check for the following amount: \$\Begin{array} \text{S15.00 Filing Fee} \text{ S30.00 Filing Fee} \text{ S55.00 Filing Fee} \text{ Certificate of Status} \text{ Certificate of Status} \text{ Certificate of Status} \text{ Registration Section} Mailing Address: Registration Section Registration Section				
Please return all c	orrespondence	concerning this matter	to the following:	
			RENE ROSARIO	
			Name of Person	
		AMERICA	N TAX & PAYROLL SERVICE	S LLC
			Firm/Company	
			887 STATE ROAD 436	
			Address	
			CASSELBERRY, FL 32707	
			,	
			- · · · · · · · · · · · · · · · · · · ·	
For further inforn	nation concernit			ancation)
		at ()	no Tolonhono Number	
	Name of Ferson		Area Code Baytii	ne receptione (various)
Enclosed is a chec	ck for the follov	ving amount:		
S25.00 Filing			Certified Copy	Certificate of Status & Certified Copy
Registr	ation Section		Registration Se	
	n of Corpora ox 6327	tions	Division of Co The Centre of	•
	issee, FL 323	14		be Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FIESTA AZUL TEQUILA HOUSE LLC

(Name of the Limited Liability Comp (A Florida Limited	any as it now appears on our records.) Liability Company)		
he Articles of Organization for this Limited Liability Company lorida document number $\frac{L19000219370}{L19000219370}$.	y were filed on 08/28/2019 and assigned		
his amendment is submitted to amend the following:			
. If amending name, <u>enter the new name of the limited lial</u>	bility company here:		
ne new name must be distinguishable and contain the words "Limited Liab	vility Company," the designation "L.L.C." or the abbreviation "L.L.C."		
nter new principal offices address, if applicable:	1112 CHICHESTER ST, ORLANDO, FL 32803		
Principal office address MUST BE A STREET ADDRESS)			
	1112 CHICHESTER ST, ORLANDO, FL 32803		
nter new mailing address, if applicable:	1112 CHICKESTER 31, ORLANDO, 11, 32803		
<u> Mailing address MAY BE A POST OFFICE BOX)</u>	·		
. If amending the registered agent and/or registered office gent and/or the new registered office address here:	address on our records, <u>enter the name of the new regist</u>		
Name of New Registered Agent:	SECRET		
New Registered Office Address:	Enter Florida street address		
	Enter Florida 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 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	DORA IVONE ORONA MARTIN	1112 CHICHESTER ST. ORLANDO, FL 32803	= Add
			□Remove
			□ Change
MGR	JOSE R SANCHEZ		🗆 Add
			□Remove
		1112 CHICHESTER ST, ORLANDO, FL 32803	\=Change
			□Add
			□Remove
			Change
			□ Add
			□Remove
		/	□Change
			□Add
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			PR 5: 1	
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ffective date, if other th	an the date of filing:	(opti	onal) r filing \ Pursuant to 605	. 0207 (
ote: If the date inserted in	this block does not meet the applicable statutory the Department of State's records.	y filing requirements, thi	is date will not be list	ed as t
record specifies a delayed Lis filed.	effective date, but not an effective time, at 12:01	a.m. on the earlier of: (b	o) The 90th day afte	r the
ated MAY 09	2023			

Typed or printed name of signee