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T. MATTHEWS
MAR 3 0 2022

COVER LETTER

TO:

IERAL BUSINESS ENTER	PRISES LLC		
Name of Limi	ited Liability Company		
nendment and fee(s) are subt	mitted for filing.		
lence concerning this matter	to the following:		
ı	OSCAR A CARDONA LOPEZ		
	Name of Person		
J AND S GENER	AL BUSINESS ENTERPRISES	LLC	
	Firm/Company		
12920 F	POSITANO CIR		
	Address		
NAPLE	S.FLORIDA 34105		
	City/State and Zip Code		
•.•			
		tification)	
cerning this matter, please co	all;		
	239 200-0308		
erson	Area Code Daytii	me Telephone Number	
following amount:			
☐ \$30.00 Filing Fee & Certificate of Status	S55.00 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		ection	
	Division of Corporations		
_ 32314		Tallahassee oe Street, Suite 810	
	Name of Limited Interpretation of Limited In	Name of Limited Liability Company mendment and fee(s) are submitted for filing. lence concerning this matter to the following: OSCAR A CARDONA LOPEZ. Name of Person J AND S GENERAL BUSINESS ENTERPRISES Firm/Company 12920 POSITANO CIR Address NAPLES,FLORIDA 34105 City/State and Zip Code INFO@CASAHISPANANAPLES.COM E-mail address: (to be used for future annual report no ecerning this matter, please call: Person at (

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

22 143 18 78 1:37

*	RAL BUSINESS ENTERPRISES LLC	
(<u>Name of the Limite</u> (d Liability Company as it now appears on A Florida Limited Liability Company)	our records.)
The Articles of Organization for this Limited Lia Florida document number £19000250877	ability Company were filed on 10/04/2	and assigned
This amendment is submitted to amend the follo	wing:	
A. If amending name, enter the new name of	the limited liability company here:	
The new name must be distinguishable and contain the wo	ords "Limited Liability Company," the design	nation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applica	ıble:	
(Principal office address MUST BE A STREE)	T ADDRESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE E		
B. If amending the registered agent and/or reagent and/or the new registered office address		ds, enter the name of the new registere
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida s	rreet address
		, Florida
	Ciņ	Zip Code

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 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	MARIA CAVIEDES VELASQUE	12920 POSITANO CIR APT 101	≣ Add
		NAPLES,FLORIDA 34105	□Remove
			□Change
			□Add
			Remove
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ffective date, if other that an effective date is listed, the dote: If the date inserted in ocument's effective date on	ate must be specifi this block does	ic and cannot be prior not meet the applica	able statutory filing	grequirements, this d	ing.) Pursuant to 605,0207
record specifies a delayed c is filed.	effective date, bu	t not an effective ti	me, at 12:01 a.m. c	on the earlier of: (b)	The 90th day after the
03/01 nted	<i>[</i> *	2022			
	./	- '/	<u> </u>		
	July	of a member or author	rigod romoconintivo	ot'a member	
	2 Miniming	or a member of autho	myeu representanive	or a member	

Filing Fee: \$25.00