## L19000279074

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APR 02 2020

S. YOUNG



## **COVER LETTER**

TO:

**Registration Section** 

ns
Name of Limited Liability Company
nent and fee(s) are submitted for filing.
concerning this matter to the following:
ONORA MUNOZ
Name of Person
SERVICES, LLC
Firm/Company
NE 51ST STREET
Address
KLAND PARK, FL 33334
City/State and Zip Code
CE@TAXSERVFL.COM  E-mail address: (to be used for future annual report notification)
g this matter, please call:
954 271-4441
at () Area Code Daytime Telephone Number
day amount
0.00 Filing Fee & S60.00 Filing Fee, Certificate of Status  Certified Copy (additional copy is enclosed)  Certified Copy (additional copy is enclosed)
Street Address:
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at (

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

~2

UCHUTACO LLC		20
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our rec Liability Company)	ords.)
The Articles of Organization for this Limited Liability Company Florida document number L19000279074  This amendment is submitted to amend the following:	were filed on 11/5/2019	20 Section of Time 1:06
A. If amending name, enter the new name of the limited liab	ility company here:	
UCHUTACOS, LLC		
The new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "I	LC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	1940 N. 30TH ROAD	
(Principal office address MUST BE A STREET ADDRESS)	HOLLYWOOD, FL 33021	
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)	HONTXMOOD PERSONS	09 & Shacidan-Glree APT 202 Dania Beach Fl 33
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	address on our records, <u>ent</u>	ter the name of the new registered
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street add	dress
		Florida
	City	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 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
			□Add
			□Remove
			Change
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			□ Remove
			□Change
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an effe	tive date, if other than the date of filing:
record Lis file	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the ed.
ated _	March 11, 2020.
	Signature of a member or adthorized representative of a member
	RODRIGO MARTINEZ
	Typed or printed name of signee