

L190000283753

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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MAIL

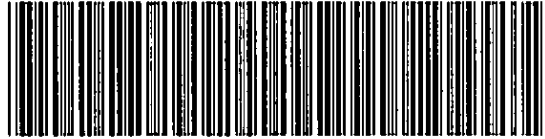
(Business Entity Name)

(Document Number)

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SECRET  
FALL ARREST FLORIDA

2022 DEC 28 AM 9:26

FILED

28

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: ROMA IN LIMA PIZZA & CUISINE LLC  
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

KIARA N HUARANGA

Name of Person

ROMA IN LIMA PIZZA & CUISINES LLC

Firm/Company

5430 FERRIS AVE

Address

AVE MARIA, FL 34142

City/State and Zip Code

joanhuaranga@gmail.com

E-mail address (to be used for future annual report notification)

RECEIVED  
TALLAHASSEE, FL  
2022 DEC 28 AM 9:26

For further information concerning this matter, please call:

JOAN HUARANGA

at ( 917 ) 531-0182

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

- |   |   |  |  |
|---|---|--|--|
| <input type="checkbox"/> \$25.00 Filing Fee | <input checked="" type="checkbox"/> \$30.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(additional copy is enclosed) |
|---|---|--|--|

**Mailing Address:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**

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**

ROMA IN LIMA PIZZA & CUISINE LLC

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 11/14/2019 and assigned  
Florida document number L19000283753.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

The new name must be distinguishable and contain the words "Limited Liability 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)

**Enter new mailing address, if applicable:**

(Mailing address MAY BE A POST OFFICE BOX)

**B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:**

Name of New Registered Agent:

KIARA N HUARANGA

New Registered Office Address:

5430 FERRIS AVE

*Enter Florida street address*

AVE MARIA

Florida

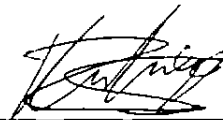
34142

*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>	<u>Address</u>	<u>Type of Action</u>
MBR	KIARA N HUARANGA	5430 FERRIS AVE	<input checked="" type="checkbox"/> Add
		AVE MARIA, FLORIDA 34142	<input type="checkbox"/> Remove
		99% OWNER	<input type="checkbox"/> Change
MGR	JOSE DIEGO CHUNG	4220 SW 21ST ST	<input type="checkbox"/> Add
		FORT LAUDERDALE, FL 33317	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	JOAN HUARANGA	5430 FERRIS AVE	<input checked="" type="checkbox"/> Add
		AVE MARIA, FLORIDA 34142	<input type="checkbox"/> Remove
		1% OWNER	<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

2022 DEC 28 AM 9:27  
 COUNTY OF DADE, FLORIDA  
 CLERK OF THE COUNTY COURT

2022 DEC 28 AM 9:27  
JAILHOUSE, FLORIDA  
JAILHOUSE, FLORIDA

2022 FEB 28 AM 9:27  
2022 DEC 28 AM 9:27  
FALL HARBOR, FLORIDA  
FALL HARBOR, FLORIDA

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing ) Pursuant to 605.0207 (3)(b)

If the record 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 record is filed

Dated                      DECEMBER 19th,                      2022

Signature of a member or authorized representative of a member

JOAN HUARANGA

Typed or printed name of signee