h20000226993

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				





300372155113

09/02/21--01015--025 **25.00



COVER LETTER

(additional copy is enclosed) Certified Copy		Registration Se Division of Cor			y e
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: MARIANO PEC CHOC Name of Person EL CHURRASCO LATIN GRILL LLC Firm/Company 908 ABBIEGAIL DR Address TALLAHASSEE. FL 32303 City/State and Zip Code PECMARIANO070@GMAIL.COM E-mail address: (to be used for future annual repon notification) For further information concerning this matter, please call: MARIANO PEC CHOC Name of Person S50 Area Code Area Code Daytime Telephone Number Enclosed is a check for the following amount: S25.00 Filing Fee Certificate of Status Certificat Copy (Certificate of Status & Certificat Copy) (Certificate of Status & Certificat Copy) (Certificate of Status & Certificat Copy)	SURJEC		RASCO LATIN GRILL LLC	•	
Please return all correspondence concerning this matter to the following: MARIANO PEC CHOC		***	Name of Limi	ited Liability Company	
MARIANO PEC CHOC Name of Person	The encl	osed Articles of .	Amendment and fee(s) are sub-	mitted for filing.	
Name of Person EL CHURRASCO LATIN GRILL LLC Firm/Company 908 ABBIEGAIL DR Address TALLAHASSEE, FL 32303 City/State and Zip Code PECMARIANO070@GMAIL.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: MARIANO PEC CHOC Name of Person Area Code Daytime Telephone Number Enclosed is a check for the following amount: Escape Section Filing Fee Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy Certified Copy Certified Copy Certified Copy Certified Copy	Please re	turn all correspo	ndence concerning this matter	Address E. FL 32303 City/State and Zip Code O70@GMAIL.COM iil address: (to be used for future annual report notification) er, please call: S50 Area Code Area Code Status Certified Copy Certificate of Status & Certificate of Status & Certificate of Status &	
EL CHURRASCO LATIN GRILL Firm/Company 908 ABBIEGAIL DR Address TALLAHASSEE. FL 32303 City/State and Zip Code PECMARIAN0070@GMAIL.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: MARIANO PEC CHOC Name of Person Area Code B 50			DIRRASCO LATIN GRILL LLC Name of Limited Liability Company of Amendment and fee(s) are submitted for filting. spondence concerning this matter to the following: MARIANO PEC CHOC Name of Person EL CHURRASCO LATIN GRILL LLC Firm/Company 908 ABBIEGAIL DR Address TALLAHASSEE. FL 32303 City/State and Zip Code PECMARIANO070@GMAIL.COM E-mail address: (to be used for future annual report notification) in concerning this matter, please call: OC at (Area Code Daytime Telephone Number) or the following amount: S30.00 Filing Fee & Certificate of Status & Certified Copy (certificate of Status & Certified Copy)		
Firm/Company 908 ABBIEGAIL DR Address TALLAHASSEE, FL 32303 City/State and Zip Code PECMARIAN0070@GMAIL.COM E-mail address; (to be used for future annual report notification) For further information concerning this matter, please call: MARIANO PEC CHOC Name of Person Area Code Daytime Telephone Number Enclosed is a check for the following amount: \$\Begin{array} \text{S55.00 Filing Fee} & \text{S55.00 Filing Fee} & \text{S60.00 Filing Fee}. \text{Certificate of Status} & \text{Certificate of Status} & \text{Certificate of Status} & \text{Certificate of Status} & \text{Certificate Opy} \text{Certificate of Copy} \text{Certificate of Status} & \text{Certified Copy} \text{Certified Copy}				Name of Person	
Address TALLAHASSEE. FL 32303 City/State and Zip Code PECMARIANO070@GMAIL.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: MARIANO PEC CHOC Name of Person S50 443-6877 at (EL CHURRASCO LATIN GRILL LLC				
Address TALLAHASSEE. FL 32303 City/State and Zip Code PECMARIANO070@GMAIL.COM IE-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: MARIANO PEC CHOC Name of Person Area Code Daytime Telephone Number Enclosed is a check for the following amount: S25.00 Filing Fee Certificate of Status Certificate Of Status & Certificed Copy (additional copy is enclosed) Certificate Of Status & Certified Copy (additional copy is enclosed)				Firm/Company	
TALLAHASSEE, FL 32303 City/State and Zip Code PECMARIAN0070@GMAIL.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: MARIANO PEC CHOC S50 Area Code Daytime Telephone Number Enclosed is a check for the following amount: S25.00 Filing Fee Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (certified Copy (certified Copy (certified Copy) (certified Copy (certified Copy) (certified Copy (certified Copy) (certified Copy)			908 ABBIEGAIL DR		
City/State and Zip Code PECMARIANO070@GMAIL.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: MARIANO PEC CHOC Name of Person Area Code Daytime Telephone Number Enclosed is a check for the following amount: \$\begin{array}{c c c c c c c c c c c c c c c c c c c			· · · · · · · · · · · · · · · · · · ·	Address	
PECMARIANO070@GMAIL.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: MARIANO PEC CHOC Stopped S			TALLAHASSEE, FL 3230	03	
E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: MARIANO PEC CHOC S50 443-6877 at (City/State and Zip Code	
For further information concerning this matter, please call: MARIANO PEC CHOC Name of Person Name of Person Area Code Daytime Telephone Number Enclosed is a check for the following amount: \$\insertigle{\text{S}}\$ \$25.00 Filing Fee Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy Certified Copy Certified Copy (additional copy is enclosed)					,
MARIANO PEC CHOC S50					neation)
Name of Person Area Code Daytime Telephone Number Enclosed is a check for the following amount: ■ \$25.00 Filing Fee Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy Certified Copy	For furth	er information c	oncerning this matter, please ca	all:	
Name of Person Area Code Daytime Telephone Number Enclosed is a check for the following amount: ■ \$25.00 Filing Fee S30.00 Filing Fee & S55.00 Filing Fee & S60.00 Filing Fee. Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy	MARIA	NO PEC CHOC			
■ \$25.00 Filing Fee Solution Status Solution Sopy is enclosed) Solution Solut		Name o	f Person		e Telephone Number
Certificate of Status Certified Copy Certificate of Status & (additional copy is enclosed) Certified Copy	Enclosed	is a check for th	ne following amount:		
	The enclosed Ar Please return all For further infor MARIANO PEC	00 Filing Fee		Certified Copy	Certificate of Status & Certified Copy

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

	TALLAHASSEE	, Flo	rida 32303 — — — Zip Code
		Enter Florida street address	
New Registered Office Address:	908 ABBIEGAIL DR		
Name of New Registered Agent:	MARIANO PEC CHO	OC	
gent and/or the new registered office addr	• •	· 	
. If amending the registered agent and/or	registered office addre	ss on our records, enter t	he name of the new regis
<u>Mailing address MAY BE A POST OFFICE</u>	<u></u>		
nter new mailing address, if applicable:	N/A		
rincipal office address SIOST BE A STRE	<u> </u>		
Principal office address MUST BE A STRE	-		
nter new principal offices address, if appli	oobler N/A		
ne new name must be distinguishable and contain the	words "Limited Liability Cor	mpany," the designation "LLC"	or the abbreviation "L.L.C."
/A	n the named namely c	ompany nere.	
. If amending name, enter the new name	of the limited lighility c	omnany here:	
his amendment is submitted to amend the fol	lowing:		
lorida document number L20000226993	·		
he Articles of Organization for this Limited I		filed on 07/30/2020	and assigned
		t now appears on our records. y Company)	

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
P	NERY PEC CHOC	908 ABBIEGAIL DR	
		TALLAHASSEE, FL 32303	= n
			□Change
AMBR	MARIANO PEC CHOC	908 ABB FEGAIL DR	■Add
		TALLAHASSEE, FL 32303	□Remove
			□Change
	 		
			Remove
			Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			Change
			□Add
			□Remove

N/A				
				
			-	
			· · · · · · · · · · · · · · · · · · ·	
			<u>.</u>	
				.
				
Effective date, if other than the	e date of filing:		(ontional)	
fan effective date is listed, the date mu Note: If the date inserted in this b document's effective date on the E	st be specific and cannot be prior to lock does not meet the applical	o date of filing or more than	i 90 days after filing.) Pursuani	t to 605.0207 (be listed as tl
record specifies a delayed effecti d is filed.	re date, but not an effective tin	ne, at 12:01 a.m. on the	earlier of: (b) The 90th da	y after the
Dated	2021			
	Signature of a member of author	it	ember	
MADIANO BEC CHO	•	med representative of a fire		
MARIANO PEC CHO	C Typed or printed			

Filing Fee: \$25.00