120000229496

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

Office Use Only



200371315032

08/24/21--01006--012 **25.00

RECEIVED
AUG 2 3 2021



alado R

COVER LETTER

TO:

Registration Section

Division of Cor	porations				
	J. ACCTO				
SUBJECT: Recuerdos	Name of Lim	ited Liability Company			
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please return all correspo	ndence concerning this matter	to the following:			
	Mayra J Villasenor				
		Name of Person			
	Recuerdos De Mi Tierra L	LC			
		Firm/Company			
	5318 Lantana St.				
		Address			
	Zephyrhills FL 33542				
		City/State and Zip Code			
	maja.villa77@gmail.com E-mail address: (to be used for future annual report not	ification)		
For further information c	oncerning this matter, please c				
Mayra Villasenor Name of Person		at (813) 900-0686 Area Code Daytin	ne Telephone Number		
raine	rreison	, aca couc			
Enclosed is a check for the	ne following amount:				
		C \$55 00 Eiling Eng &	☐ \$60.00 Filing Fee,		
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy (additional copy is enclosed)		
Maritima Adduso		Street Address			
Mailing Address: Registration Section		<u>Street Address:</u> Registration Sc	ection		
Division of C		-	Division of Corporations		
P.O. Box 632	-		The Centre of Tallahassee		
Tallahassee, FL 32314		2415 N. Monro	2415 N. Monroe Street, Suite 810		

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Recuerdos de Mi Tierra 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 7/31/2020 Florida document number <u>L20000229496</u> 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 "LLC." 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: New Registered Office Address: Enter Florida street address Florida City

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.

New Registered Agent's Signature, if changing Registered Agent:

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
			□Add
			□Remove
			DChange
			DAdd
			□Remove
			□Remove
			□Change
****			□Add
			□Remove
			☐Change
			□Add
			□Remove
			□Change

amen	ding business activi	iles to retail safe	s, and root st	and concession			
	· · · · · · · · · · · · · · · · · · ·						
	.					•••	
	 		-				
							
					<u> </u>		
							
					-		
						-	
					· · ·		
Tanadana di	ata if other than	the date of fili	n.a.			(optional)	
<u>te:</u> If th	ate, if other than date is listed, the date date inserted in the effective date on the	s block does not	meet the appl	licable statutory t	or more than 90 of filing requirem	lays after filing.) Pents, this date wi	ursuant to 605.0207 Ill not be listed as
ecord spe is filed.	cifies a delayed effe	etive date, but n	ot an effective	time, at 12:01 a.	.m. on the earli	er of: (b) The 9	90th day after the
ted	August	10	. 707	1.			
		Signature of	a member or au	thorized representa	ative of a membe	r	
		Maura	\ \1	UCI & CMC	\ <u>`</u>		
		いいひいい	$(I \setminus I)$	いんしょひせんし	<i>J</i> 1		

Filing Fee: \$25.00