## 121000022474

(Requestor's Name)
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(City/State/Zip/Phone #)
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## **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: Tequila Veitione Name of L	5. Mexican Cuisino, LLC imited Liability Company
The enclosed Articles of Amendment and fee(s) are so	ubmitted for filing.
Please return all correspondence concerning this matter	er to the following:
<u>Carn</u>	ren H. Rivera de Gucmero Name of Person
	Veitiuno Mexican Cuisine, LLC
2311 Fi-S	524 106 Address
	COCOG, TC 32926  City/State and Zip Code
	Sverdes (a) hotmail (om): (to be used for future annual report notification)
For further information concerning this matter, please	call:
Carmen H. Rivera de Guera Name of Person	Area Code Daytime Telephone Number
Enclosed is a check for the following amount:	,
S25.00 Filing Fee ☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & ☐ \$60.00 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 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

	<i>~</i> .	2021 FEB . 10 PH F	
Tegula Veitiuno Mex	ican Wis	sine, LUCTA 5: 40	
(Name of the Limited Liability Compar (A Florida Limited L	<u>iy as it now appears (</u> iability Company)	on our records.)	
The Articles of Organization for this Limited Liability Company	wara filad on de	Supplicated 8 200 Francisco	v.i
Florida document number <u>L 210000 22474</u> .	were fried on <u>QC</u>	$\frac{dNOOM}{d} = \frac{d}{d} + \frac{202I}{d}$ and assigne	a
Florida document number 121000022474.			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liabi	lity company here	<u>:</u> :	
Teguila Veintiuno Mexican Co The new name must be distinguishable and contain the words "Limited Liability"	sisine, LL	. C	
The new name must be distinguishable and contain the words "Limited Liabili	ty Company," the desi	gnation "LLC" or the abbreviation "L.L.C."	
Enter new principal offices address, if applicable:	NIA		
(Principal office address MUST BE A STREET ADDRESS)	NIA		
Enter new mailing address, if applicable:	NIA		
(Mailing address MAY BE A POST OFFICE BOX)	N/A		
	<u></u>		
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	ddress on our reco	ords, <u>enter the name of the new re</u>	<u>zisterec</u>
The second vince data essentite.			
Name of New Registered Agent:	NIA		
New Registered Office Address:	NIA		
New Registered Office Audress.		i street address	
	NIA	Florida	
<del></del>	City	Zip Code	
New Registered Agent's Signature, if changing Registered Agent:			
I hereby accept the appointment as registered agent and agre	e to act in this cap	pacity. I further agree to comply w	ith the
provisions of all statutes relative to the proper and complete p	performance of my	v duties, and I am familiar with an	d
accept the obligations of my position as registered agent as p. being filed to merely reflect a change in the registered office of	rovided for in Cha address. I hereby a	upter 605, F.S. Or, if this documen confirm that the limited liability	1 is
company has been notified in writing of this change.			

N/A
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 2021 FEB \_ 1 PH 5: 40 Title Name <u>Address</u> Type of Action NIA N/A N/A \_\_\_\_ □Remove \_\_\_\_\_\_\_ □Change \_\_\_\_ □ Add \_\_\_\_\_\_ □Remove \_\_\_\_\_ □Change \_\_\_\_\_ □Remove \_\_\_\_\_ Change \_\_\_\_\_\_ □Remove \_\_\_\_\_ □ Change 

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	2021 FEB _ 1 PM 5: 39
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<u></u>	
date, if other than the date of filitive date is listed, the date must be specific a	ing:
the date inserted in this block does no	t meet the applicable statutory filing requirements, this date will not be list
it's effective date on the Department o	f State's records.
manife and the second of the s	
specifies a delayed effective date, but n l.	iot an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day afte
January 29	2021
///	flor
Signature of	a member or authorized representative of a member
Corn	ren H. Rivera de Guerrero  Typed or printed name of signee