

## Florida Department of State

Division of Corporations  
Electronic Filing Cover Sheet**L21000043204**

**Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.**

(((H22000170950 3)))



H220001709503ABC-

**Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.**

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : GLOBAL SUCCESS INVESTMENTS LLC

Account Number : I20200000016

Phone : (954)903-4036

Fax Number : (954)246-0340

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: \_\_\_\_\_

2022 MAY 12 PM 4:23

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
PEPPER PADEL MIAMI LLC**

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

TO: Registration Section  
Division of Corporations

H220001709503

SUBJECT: PEPPER PADEL MIAMI 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:

ANDRES CONTRERAS  
Name of Person  
PEPPER PADEL MIAMI LLC  
Firm/Company  
1255 NW 135TH ST  
Address  
NORTH MIAMI, FL 33168  
City/State and Zip Code  
oscar.gualdron@taxcareinc.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Andres Contreras 954 9034036  
Name of Person at ( ) Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee

☐ \$30.00 Filing Fee &  
Certificate of Status

☐ \$55.00 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 ORGANIZATION  
TO  
ARTICLES OF ORGANIZATION  
OF

PEPPER PADEL MIAMI 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 01/22/2021 and assigned  
Florida document number L21000043204.

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: \_\_\_\_\_

New Registered Office Address: \_\_\_\_\_

Enter Florida street address

\_\_\_\_\_, 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

MGR = Manager  
 AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	ANDRES A CONTRERAS	1255 NW 135TH ST	<input type="checkbox"/> Add
		NORTH MIAMI, FL 33168	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	ANDRES A CONTRERAS	1255 NW 135TH ST	<input checked="" type="checkbox"/> Add
		NORTH MIAMI, FL 33168	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
COO	JUAN CARLOS ARCIA	131 NW 2nd ave, unit 4	<input type="checkbox"/> Add
		HALLANDALE, FL, 33009	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	JUAN CARLOS ARCIA	131 NW 2nd ave, unit 4	<input checked="" type="checkbox"/> Add
		HALLANDALE, FL, 33009	<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

**D. If amending any other information, enter change(s) here:** *(Attach additional sheets, if necessary.)*

This image shows a single sheet of white paper with horizontal blue or grey ruling lines. The lines are evenly spaced and run across the width of the page. There is no handwriting or other markings on the paper.

F. Effective date, if other than the date of filing: \_\_\_\_\_ (optional)

Effective date, if other than the date of filing: \_\_\_\_\_ (optional)  
(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)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

May 12<sup>th</sup>

2022

P/ Andres Contreras

Signature of a member or authorized representative of a member

Andres Contreras

Typed or printed name of signee

**Filing Fee: \$25.00**