L21000144459

(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:

Office Use Only



800365632218

05/10/21--01021--008 **25.00

RIJUL 19 AH 6:57

O SIMMONS
JUL 21 2021



RECEIVED

FLORIDA DEPARTMENT OF STATE 1971 JUL 19 PM 2:27 Division of Corporations

June 17, 2021

rain yang

RICARDO MARVERO ORTIZ 2510 HOLLIS DR TAMPA, FL 33618

SUBJECT: FIVE STAR BAY KITCHEN LLC

Ref. Number: L21000144459

We have received your document for FIVE STAR BAY KITCHEN LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Octavia L Simmons Regulatory Specialist II Supervisor

Letter Number: 921A00013557

COVER LETTER

TO:

Registration Section Division of Corporations

SUBJECT: Five	2 Har Bay Name o'DLimi	Kitchen ited Liability Company	
	. valle of Silling	Substity Company	
The enclosed Articles of a	Amendment and fee(s) are sub-	mitted for filing.	
Please return all correspon	ndence concerning this matter	to the following:	
	Ricardo D	Daniel Mariera	o Octiz
		Firm/Company	
	2510 Hol	LIS DY Address	
	Tampa FL	33618 City/State and Zip Code	
	E-mail address: (to be used for future annual report not	ification)
For further information co	oncerning this matter, please ca	all:	
Ricardo	No.	at (813) 458 Area Code Daytir	ne Telephone Number
Name of	Person	Area Code Dayin	ne Telephone Number
Enclosed is a check for th	e following amount:		
S25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addres Registration S Division of C P.O. Box 632	Section orporations 7	Street Address: Registration Se Division of Co The Centre of	rporations Tallahassee
Tallahassee, F	·L 32314	2415 N. Monro	oe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Five Stay Bay Kitchen 531 Jul 19 111 6:57

(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 Li Florida document number <u>L21000</u>	lability Company	were filed on <u>03</u>	129 202	1 and assigned
This amendment is submitted to amend the follo	owing:			
A. If amending name, enter the new name of	f the limited liab	ility company here:		
The new name must be distinguishable and contain the w	ords "Limited Liabil	lity Company," the desig	nation "LLC" or the abt	previation "L.L.C."
Enter new principal offices address, if applic	able:			
(Principal office address MUST BE A STREE	T ADDRESS)			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	<u>BOX)</u>			
B. If amending the registered agent and/or ragent and/or the new registered office address		address on our reco	rds, <u>enter the name</u>	e of the new registered
Name of New Registered Agent:	Ricardo	Daniel	Marreson	Ortiz
New Registered Office Address:	2510	Hollis Dr Enter Florida	street address	
	Tam	City City	, Florida	33618 Zip Code
New Registered Agent's Signature, if changing I	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 = M $-AMBR = A$	lanager Authorized Member		2521 JUL 19 AF: 6: 57	
<u>Title</u>	<u>Name</u>		ddress	Type of Action
MGR	Ricardo Daniel	Marrero Ci	tiz/2510 Hollis D	Add
		_	tre/2510 Hallis D Tampa FL 33619	8 □Remove
			· · · · · · · · · · · · · · · · · · ·	(L)Change
<u>AMBR</u>	Reinalostin	co Valdes	2510 Hollis D	∑ □Add
		_	Tampa FL 336	Remove □Remove
		-		[denange
		_ _		□Add
		_		□Remove
		_		□Change
				🗆 Add
		_		□Remove
		_		□Change
				□Add
		_		□Remove
		_		□Change
		<u></u>		□Add
		_		□Remove

_ □Change

	, , , , , , , , , , , , , , , , , , ,
	221 JUL 19 An 6: 57
,	*
	~
	· · · · · · · · · · · · · · · · · · ·
	 '
ective date, if other th	an the date of filing: (optional)
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 605.02
	this block does not meet the applicable statutory filing requirements, this date will not be listed in the Department of State's records.
cord 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
s filed.	effective date, but not an effective finite, at 12.01 a.m. on the earner of (0). The 70th day after the
/ //	
ned <u>05/04/</u>	2.(
	A A II
- A-C/	Merlo Milli
	Signature of a member or authorized representative of a member
	Ricardo Daniel Marrero Ortiz Typed or printed name of signee
	KIWIOO DANKI MAKA ONTE