## 121000333927

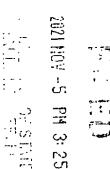
(Requestor's Name)
(Address)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
(Eocament Namber)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
Special instructions to 1 ming Officer.

Office Use Only



400376160714

11/05/21--01009--024 \*\*25.00



A. BUTLER NOV 2 9 2021

## **COVER LETTER**

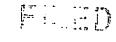
TO:	Registration Sec Division of Corp			
CHEA	Prov	riew Landscap	ina ILC	
SORM	VCI:	Name of Limi	ted Islability Company	<u>.</u>
The en	closed Articles of A	Amendment and fee(s) are sub-	nitted for filing.	
Please	return all correspor	ndence concerning this matter t	to the following:	
		August	O F. Sandoval	
		<del></del>	Name of Person	<del></del>
			Firm/Company	<u> </u>
		18032	CW 164 PL.	
			Address	<del></del>
			2727	
		Homes read,	FL 33033	<del></del>
		E-mail address: (t	o be used for future annual report notific	cation)
For fur	ther information co	oncerning this matter, please ca	dl:	
	Augusto Si	Name of Limited Fidebility Company  mendment and fee(s) are submitted for filing.  ence concerning this matter to the following:  Augusto F. Sandoval Name of Person  Firm/Company  18032 SW 164 Pt. Address  riomestead, Ft. 33033  City/State and Zip Code  fir incco @ 4++ nc+ E-mail address: (to be used for future annual report notification)  cerning this matter, please call:  at 305 Jayrime Telephone Number  following amount:  \$550.00 Filing Fee & Certificate of Status & Certificate of Status & Certificate of Status & Certificate of Status & Certificate Opy (additional copy is stackard)  Street Address: Registration Section		
	Name of	Person	Area Code Daytime	Telephone Number
		<b>.</b>		
		-		
<b>⅓</b> \$2	5.00 Filing Fee		Certified Copy	Certificate of Status & Certified Copy
	Mailing Address			
	Registration S			
	Division of Co P.O. Box 632		The Centre of Ta	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION [ ] **OF**



2021 HOY -5 PM 3: 25 PYONIEW Lands Cafing LLC
(Name of the Limited Liability Company as it now appears on our records)

(A Florida Limited Liability Company)

[ALL ] | TELET The Articles of Organization for this Limited Liability Company were filed on MAY 12, 2021 and assigned Florida document number 121000 233 927 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: AUGUSTO F SANdOVAL Name of New Registered Agent: New Registered Office Address: Enter Florida street address

## 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. Thereby confirm that the limited liability company has been notified in writing of this change.

LChanging 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
MUR	Augusto F sandoval		□ Add
		<del></del>	□Remove
			& Change
MAR	Pibecca I Tinoco		□Add
			<b>⊠</b> Remove
			□Change
			□Add
			□Remove
			□Change
	<del></del>		□Add
			□Remove
			□Change
<del></del>			□ Add
			□Remove
			□Change
			□ Пепюче
			□Change

_	N)A
_	
_	
_	
_	
_	
-	<del></del>
_	
-	
_	
_	
_	
_	
_	
-	
_	
fecti	ve date, if other than the date of filing: VA (optional)
	ctive date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuam to 605,0207 (If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the
ocume	ent's effective date on the Department of State's records.
ecord	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
	ed.
is file	
l is filo	
l is file	······································
l is file	
l is file	(IIA
l is file	Signature of a member or authorized representative of a member

Filing Fee: \$25.00