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September 14, 2022

Florida Department of State,

Registration Section,

Division of Corporations,

P.O. Box 6327, Tallahassee, FL 32314.

RE: Amended Articles of Organization of M & T Encounters LLC.

Dear Sir/Madam

This firm represents the interests of Mrs. Margarita Rojas, and we are formally filing and/or submitting an amendment to the Articles of Organization of M & T Encounters LLC, and are enclosing the following duly completed and signed documents:

- Amended Articles of Organizations of M & T Encounters LLC.
- Check payable to the Florida Department of State, Division of Corporations in the amount of the \$25 USD fee.

All communications or responses may be sent directly to the following addresses, **213 N 15th Av, Hollywood, Florida 33020**, phone number **+1 (954) 870-1575** or, **268 Alhambra Circle, Second Floor Coral Gables, Miami-Dade, FL 33134**; and to the e-mail addresses, **andrespardo@francolawfirmmpa.com** or **tita.apfilms@gmail.com**.

/s/ Fernando Franco

FERNANDO FRANCO, ESQ.
FL BAR NO. 120457

FRANCO LAW FIRM, P.A.
268 Alhambra Circle,
Second Floor
Coral Gables, FL 33134
Tel: (786) 724-0900
Fax: (786) 221-2407
Service @francolegalgroup.com

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DIVISION OF CORPORATIONS
FLORIDA DEPARTMENT OF STATE

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: M & T ENCOUNTERS 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:

Fernando Franco

Name of Person

Franco Law Firm P.A.

Firm/Company

268 Alhambra Circle, Second Floor, Coral Gables

Address

Miami, Florida, 33134

City/State and Zip Code

andrespardo@francolawfirm.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Fernando Franco

786

4276661

at (_____) _____

Name of Person

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

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DIVISION OF CORPORATIONS

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

M & T ENCOUNTERS 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 June 10, 2021 and assigned
Florida document number L21000271626.

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:

213 N 15TH AVE, HOLLYWOOD, FL 33020

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

213 N 15TH AVE, HOLLYWOOD, FL 33020

(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:

Margarita Maria Rojas Uribe

New Registered Office Address:

213 N 15TH AVE

Enter Florida street address

HOLLYWOOD

City

Florida 33020

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.


Margarita Maria Rojas Uribe
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>	<u>Address</u>	<u>Type of Action</u>
MGR	Margarita Maria Rojas Uribe	213 N 15TH AVE, HOLLYWOOD, FL 33020	<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
MGR	Samuel Jr Pampanella	3501 N OCEAN DRIVE, PH5 HOLLYWOOD, FL 33019	<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Samuel Jr Pampanella	3501 N OCEAN DRIVE, PH5 HOLLYWOOD, FL 33019	<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
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			<input type="checkbox"/> Change

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(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)

Dated September 6, 2022 08:00 a.m

Signature of a member or authorized representative of a member

Typed or printed name of signee

Filing Fee: \$25.00