

L2100003578
Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number : (850) 617-6383

From: Account Name : BLANCO ACCOUNTING I, INC.
Account Number : I20100000060
Phone : (305) 828-1148
Fax Number : (305) 828-1709

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

Email Address: _____

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
MI SABOR YOUR TASTE LLC

Certificate of Status	0
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2021 JUL 13 PM 1:20
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TALLAHASSEE, FLORIDA

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TALLAHASSEE, FLORIDA
2021 JUL 13 AM 8:58

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BB
7/14/21

TO
ARTICLES OF ORGANIZATION
OF

MI SABOR YOUR TASTE 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 07/01/2021 and assigned
Florida document number L21000303578

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)

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TALLAHASSEE, FLORIDA

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

If on Jul. 13. 2021 11:46AM you(s) AMTRAK SOMCETCDISPO1 alter the title, name, and address of No. 04501301P. 3mg added or removed from our records:

MGR = Manager
AMBR = Authorized Member

Title Name Address Type of Action

MGR CARMEN R FLEITAS 5460 WEST 24 AVE 206 HIALEAH FL 33016 Add

Remove

Change

Add

Remove

Change

Add

Remove

Change

Add

Remove

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