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TO: Registration Se Division of Cor			
Big Taco, L			
SUBJECT:	Name of Limi	ited Liability Company	
The second second second	1 loom and Car(a) and the	united Constitute	
	Amendment and fee(s) are sub-		
Please return all correspo	endence concerning this matter	to the following:	
	Gerald Prescott		
		Name of Person	
	Big Taco		
		Firm/Company	
	1455 State Road 436, Ste.	117	
		Address	
	Casselberry, FL 32707		
		City/State and Zip Code	·
	GeraldP@bigtaco.co E-mail address: (to be used for future annual report noti	fication)
For further information c	oncerning this matter, please ca	all:	
Gerald Prescott		407 417-3246	
Name o	f Person	at () Area Code Daytim	e Telephone Number
m i satta di babad	C. Harrison and and		
Enclosed is a check for the	_	Fig. 655 00 Eiling Ess &	☐ \$40.00 Eiling For
■ \$25.00 Filing Fee	□ \$30.00 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	ss:	Street Address:	
Registration S		Registration Se	ction .

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

Big Taco, LLC

2023 OCT 13 AM 9: 16

		INCLAHASSEE, FLORIDA			
	were filed on $\frac{9/13/20}{1}$	221 and assigned			
Florida document number L21000404621					
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 "LLC." 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 register agent and/or the new registered office address here: Name of New Registered Agent: Market Stree Read 436, Ste. 117 Casselberry, FL 32707					
A. If amending name, enter the new name of the limited liab	oility company here:				
The new name must be distinguishable and contain the words "Limited Liabi	ility Company," the design	nation "LLC" or the abbreviation "L.L.C."			
Enter new principal offices address, if applicable:	1455 State Road 436, Stc. 117				
	Casselberry, FL 327	707			
Enter new mailing address, if applicable:	1455 State Road 436, Ste. 117				
(Mailing address MAY BE A POST OFFICE BOX)	Casselberry, FL 327	707			
	address on our reco	rds, enter the name of the new registere			
Name of New Registered Agent: Gerald Prescot					
New Registered Office Address: 1455 State Roa	abmitted to amend the following: ne, enter the new name of the limited liability company here: istinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." I offices address, if applicable: Iress MUST BE A STREET ADDRESS) address, if applicable: 1455 State Road 436, Stc. 117 Casselberry, FL 32707 address, if applicable: 1455 State Road 436, Stc. 117 Casselberry, FL 32707 registered agent and/or registered office address on our records, enter the name of the new registered we registered office address here: EW Registered Agent: Gerald Prescott				
	Enter Florida s	street address			
		22707			
Casselberry		, Florida 32707			

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 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
			□Add
			□Remove
			□Change
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