121000474762

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(Audiess)
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COVER LETTER

TO: Registration Se Division of Co		<i>i</i>	, 9
TOO ESTA	NRICO ELC	·	
SUBJECTS	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	RODRIGUEZ, ALEXANI	DER	
		Name of Person	
	TOO ESTA RICO LLC		
		Firm/Company	
	2144 W BIRD STREET		
		Address	
	TAMPA, FL 33604		
	cocovan4423@gmail.com	City/State and Zip Code	
		to be used for future annual report notification)	
For further information of	concerning this matter, please ca	ıll:	
RODRIGUEZ, ALEXANDER		337 7076956	
Name of Person		at ()	Number
Enclosed is a check for t	he following amount:		
■ \$25.00 Fiting Fee	☐ \$30.00 Filing Fee & Certificate of Status	Certified Copy C radditional copy is enclosed) C	60.00 Filing Fee, fertificate of Status & fertified Copy additional copy is enclosed)
Mailing Address		Street Address:	
Registration : Division of C		Registration Section Division of Corporations	
P.O. Box 632 Tallahassee,		The Centre of Tallahasse 2415 N. Monroe Street, S.	
		Tallahassee, FL 32303	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

TOO ESTA RICO 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 11/01/2021 and assigned Florida document number L21000474762 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: Name of New Registered Agent: New Registered Office Address: Enter Florida street address Cin

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 amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
AMBR	Rodriguez. Alexander	2144 W BIRD STREETTAMPA, FL 33604	□Add
			■Remove
AMBR Rodriguez Pena, Alexander	Rodriguez Pena, Alexander	2144 W BIRD STREETTAMPA, FL 33604	= Add
			TRemove
			Change
			□Remove
			EChange
			□Remove
			□Change
			□Remove
			L Change
			⊏Add
			□Remove
			Fit hange

	The change that is requested is to add a second last name to the AMBR. Rodriguez Pena Alexander
	
	
	
L'ee	
(If an e Note	effective date, if other than the date of filing:
he reco	ord 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 filed.
Date	d
	$50/V_{5}/$
	-Mopel
	- , ,
	Signature of a member or authorized representative of a member
	Signature of a member of authorized representative of a member Alexander Rodriguez Auria. Typed or printed name of signee

Filing Fee: \$25.00