L22 000 165 423

(Re	questor's Name)	
(Ad	dress)	-
(Ad	dress)	
(Cit	y/State/Zip/Phone	= #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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SECRETARY OF STATE
TALLAHASSE

COVER LETTER

то:	Registration Se Division of Cor	ction porations				
RUGE HAMBURGUESERIA LLC						
SUBJEC	SUBJECT:					
The encl	losed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please re	eturn all correspo	ndence concerning this matter	to the following:			
		JAVIER E GUZMAN				
			Name of Person			
		RUGE HAMBURGUESE	RIA LLC			
			Firm/Company			
		19370 COLLINS AVE AF	T [0]4			
			Address	<u> </u>		
		SUNNY ISLES BEACH, I	FL 33160			
			City/State and Zip Code	-		
		USTUEMPRESA@GMAII				
Can Canh	in Composition of		to be used for future annual report no	diffication)		
		oncerning this matter, please c	an.			
JAVIER E GUZMAN		786 340-0372 at ()				
Name of Person		Area Code Daytii	me Telephone Number			
Enclosed	d is a check for th	ne 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 S		Street Address: Registration Se	ection		
Division of Corporations P.O. Box 6327		Division of Co The Centre of				

Tallahassee, FL 32314

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

RUGE HAMBURGUESERIA LI				
(Name of the Lim	ited Liability Comp. (A Florida Limited	any as it now appears on our reco Liability Company)	ords.)	-
The Articles of Organization for this Limited I	Liability Company			assigned
This amendment is submitted to amend the fo				
A. If amending name, enter the new name	of the limited lial	oility company here:		
NA				
The new name must be distinguishable and contain the	words "Limited Liab	ility Company," the designation "L	LC" or the abbreviation	"L.L.C."
Enter new principal offices address, if appl	icable:	NA		······
(Principal office address MUST BE A STRE	ET ADDRESS)			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	<u> E BOX)</u>	NA		
B. If amending the registered agent and/or agent and/or the new registered office addr		address on our records, <u>ent</u>	35	new register
Name of New Registered Agent:	NA		LAH LAH	
New Registered Office Address:	NA		CRETARY OF	= 11
		Enter Florida street addi	ress mm o	
	NA	, 1	Florida <u>NA 구물</u>	ب 2
		City	Zi pro o	

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 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
MGR	JAVIER E GUZMAN	19370 COLLINS AVE APT 1014	□Add
		SUNNY ISLES BEACH, FL 33160	■ Remove
			□Change
AMBR	JUAN RUGELES	19370 COLLINS AVE APT 1014	≣ Add
		SUNNY ISLES BEACH, FL 33160	□Remove
			□Change
NA	NA	NA	🗆 Add
			□Remove
			□Change
NA	NA	NA	□Add
			□Remove
			□Change
NA	NA	NA	□Add
		.	□Remove
			□Change
NA	NA	NA	□Add
			□Remove
			□ Change