

L22000235354

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

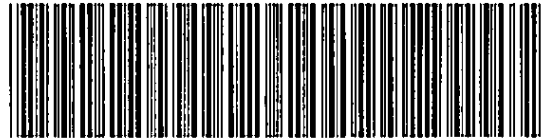
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



100389430221

01/19/2022--01012-011-#00000

FILED

2022 JUN 17 AM 11:19

CLERK OF STATE
TALLAHASSEE, FLORIDA

SEP - 16 2022

S. PRATHER

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Vasco & Company Seafood, 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:

Eduardo F. Morrell, Esq.

Name of Person

Morrell, P.A.

Firm/Company

425 S. Florida Ave., Suite 101

Address

Lakeland, FL 33801

City/State and Zip Code

mreyes@sea-delight.com

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

For further information concerning this matter, please call:

Eduardo F. Morrell

863

802-8037

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

2022 JUN 17 AM 11:20
TALLAHASSEE, FLORIDA
Classified

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

This amendment is submitted to amend the following:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Coral Springs, FL 33071

Coral Springs, FL 33071

_____, Florida _____
City Zip Code

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	Eugenio Sanchez	12514 W. Atlantic Blvd.	<input type="checkbox"/> Add
		Coral Springs, FL 33071	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
MGR	Margarita Sanchez	12514 W. Atlantic Blvd.	<input type="checkbox"/> Add
		Coral Springs, FL 33071	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
MGR	Marilyn Reyes	12514 W. Atlantic Blvd.	<input checked="" type="checkbox"/> Add
		Coral Springs, FL 33071	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Cesar Bencosme	12514 W. Atlantic Blvd.	<input type="checkbox"/> Add
		Coral Springs, FL 33071	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

[illegible]

E. Effective date, if other than the date of filing: _____ (optional)

(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)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record 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 record is filed.

Dated June 10

2022

Signature of a member or authorized representative of a member

Eugenio Sanchez

Typed or printed name of signee

WILLIAM H. ASSECI, FLORIDA

2022 JUN 17 AM 11:20

Filing Fee: \$25.00