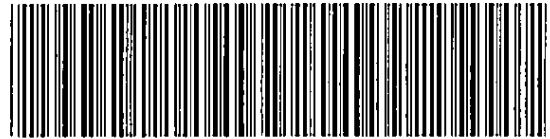


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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

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(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FL

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** Carnicero Group 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:

Kaari Gagnon, Esq.

\_\_\_\_\_  
Name of Person

Zarco Einhorn Salkowski P.A.

\_\_\_\_\_  
Firm/Company

2 S. Biscayne Blvd., Suite 3400

\_\_\_\_\_  
Address

Miami, FL 33131

\_\_\_\_\_  
City/State and Zip Code

kgagnon@zarcolaw.com

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

For further information concerning this matter, please call:

Kaari Gagnon

305

374-5418

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

# ZARCO EINHORN SALKOWSKI

ROBERT ZARCO  
ROBERT M. EINHORN  
ROBERT F. SALKOWSKI\*  
HIMANSHU M. PATEL  
KAARI-LYNN S. GAGNON  
MARY NIKEZIC\*\*  
MICHAEL D. BRAUNSTEIN  
JACKY BEDA  
BRENDA PHANG  
SETH M. SHAPIRO\*\*\*  
ALEC R. SHELOWITZ

ATTORNEYS AT LAW  
2 S. BISCAYNE BOULEVARD  
34TH FLOOR  
MIAMI, FLORIDA 33131

MIAMI  
TELEPHONE (305) 374-5418  
TELEFAX (305) 374-5428

WEST PALM BEACH  
TELEPHONE (561) 721-2661

WWW.ZARCOLAW.COM

\*ALSO ADMITTED TO PRACTICE IN NJ  
\*\*ALSO ADMITTED TO PRACTICE IN IL  
\*\*\*ALSO ADMITTED TO PRACTICE IN NY

February 16, 2024

## Via Federal Express

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

Re: **Carnicero Group LLC**  
**Articles of Amendment to Articles of Organization**  
**Florida Document No. L22000434700**

To whom it may concern:


Please find enclosed the following documents associated with the amendment filing for Carnicero Group, LLC:

- (i) Articles of Amendment to Articles of Organization for Carnicero Group LLC; and a
- (ii) Check for \$30.00 for the filing fees associated with the amendment and the requested Certificate of Status reflecting same.

Please return the Certificate of Status in the self-addressed envelope also enclosed.

Should you have any questions, please do not hesitate to contact me.

Very truly yours,



Nadia Espinosa  
Paralegal to Kaari Gagnon, Esq.

Encl.

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

CARNICERO GROUP 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 10/10/2022 and assigned  
Florida document number L22000434700.

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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2025 FEB 19 AM 8:15  
CLERK OF STATE  
TALLAHASSEE, FL

**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:

Zarco Einhorn Salkowski P.A.

New Registered Office Address:

2 S. Biscayne Boulevard, Suite 3400

*Enter Florida street address*

Miami

*City*

Florida 33131

*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.*

DocuSigned by:

kaari Gagnon

8B0409E1D776425  
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	Carlos E. Cruz		<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Cruz Hospitality Group LLC	11337 SW 74th Terrace	<input checked="" type="checkbox"/> Add
		Miami, Florida 33173	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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