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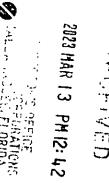
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A. BUTLER MAR 13 2023

COVER LETTER

TO: Registration Sec Division of Corp			
SUBJECT: TIEN	da Latino Name of Limite	GT LL_(, ed Liability Company	
The enclosed Articles of A	amendment and fee(s) are subm	itted for filing.	
Please return all correspon	dence concerning this matter to	the following:	
	Juan Juc	into Sebas	tian
	Tienda Lo	Hino GT L Firm/Company	LC
	208 W H	WY 98 Address	
	port saint	Joe FL 3	2456
	JSP bastlan of E-mail address: (to	ficial 13 @ gr	rall.com
For further information co	oncerning this matter, please cal	II:	
Juan Jacin		at (<u>850</u>) <u>370</u> Area Code Dayti	-0\$19 me Telephone Number
Enclosed is a check for th	ne following amount:		
☑ \$25.00 Filing Fee	S30.00 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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Tienda Lating GT L (Name of the Limited Liability Company (A Florida Limited Lia	<u>-LC</u>	onder) 4
(Name of the Limited Liability Company (A Florida Limited Lia	bility Company)	or the contract of the contrac
The Articles of Organization for this Limited Liability Company w	ere filed on <u>3/7 fo</u>	ARAR 13 FHard Wigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabili	ty 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 acagent and/or the new registered office address here:	ldress on our records, <u>e</u>	nter the name of the new registered
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street a	
	City	_, Florida
New Registered Agent's Signature, if changing Registered Agent:	g	<i>r</i> -
I hereby accept the appointment as registered agent and agre provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my dutic rovided for in Chapter (es, and I am familiar with and 605, F.S. Or, if this document is

If Changing Registered Agent, Signature of New Registered Agent

If amending or removed	g Authorized Person(s) auth from our records:	orized to manage, <u>ente</u>	r the title, name, and add	ress of each person being added
MGR = M $AMBR = A$	lanager uthorized Member			
Title	<u>Name</u>	<u>Addres</u>	<u>s</u>	Type of Action
MGR	Juan Joxir	nto Sebastian	208 WHWY	98 Port Saint Joe FLi32
				□Remove
				□Change
	-1-24			□Add
				□Remove
				Change
				□Add
				Remove
		-		□ Change
				□Remove
				Change
				□Add
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fan ef <u>Note:</u>	ive date, if other than the date of filing:
e reco rd is fi	rd 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 led.
Dated	_03/13/23
	Signature of a member or adultorized representative of a member
	EUIGIA GLEGORIO BERNAS-E Typed or printed name of signee

Filing Fee: \$25.00