## L23000046180

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## **COVER LETTER**

| Div           | ision of Corp   | porations                                       |   |  |  |  |  |  |
|---------------|-----------------|---|---|--|--|--|--|--|
| oud incer.    |                 | SABOR CATRACHO, LLC                             |   |  |  |  |  |  |
| SUBJECT:      |                 | Name of Limi                                    | ited Liability Company  |  |  |  |  |  |
| The enclose   | d Articles of a | Amendment and fee(s) are sub                    | mitted for filing.  |  |  |  |  |  |
| Please returi | i all correspoi | ndence concerning this matter                   | to the following:   |  |  |  |  |  |
|               |                 | LIDYCE IVETH MARTIN                             | NEZ RODRIGUEZ   |  |  |  |  |  |
|               |                 |   | Name of Person  |  |  |  |  |  |
|               |                 |   | Firm/Company  |  |  |  |  |  |
|               |                 | 602 20TH AVE W                                  |   |  |  |  |  |  |
|               |                 | Address   |   |  |  |  |  |  |
|               |                 | BRADENTON, FL 34205                             |   |  |  |  |  |  |
|               |                 |   | City/State and Zip Code   |  |  |  |  |  |
|               |                 | E-mail address: (                               | to be used for future annual report notif                           | fication)  |  |  |  |  |
| For further i | nformation co   | oncerning this matter, please ca                | all:  |  |  |  |  |  |
| LIDYCE IV     | ETH MART        | INEZ RODRIGUEZ                                  | 941 301-6241<br>at ( )  |  |  |  |  |  |
|               | Name of         | l'Person  | Area Code Daytime   | e Telephone Number   |  |  |  |  |
| Enclosed is   | a check for th  | e following amount:                             |   |  |  |  |  |  |
| \$25,00       | Filing Fee      | □ \$30.00 Filing Fee &<br>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) |  |  |  |  |
|               | MAILI           | ING ADDRESS:                                    | STREET/COURI  | ER ADDRESS:  |  |  |  |  |

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

TO:

Registration Section

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| SAZON 1 SABOR CATRACTIO.  |  |  |
|---|--|--|
| (Name of the Lim)   | ted Liability Company as it now ap<br>(A Florida Limited Liability Compa | 20 21/2 2 12 3                                       |
| The Articles of Organization for this Limited L                                       | iability Company were filed or   | n <u>+05/15/20</u> 23 and assigned                   |
| This amendment is submitted to amend the following                                    | owing:   |  |
| A. If amending name, enter the new name of  | f the limited liability compan   | ı <u>y here</u> :                                    |
| The new name must be distinguishable and contain the                                  | words "Limited Liability Company."                                       | the designation "L.L.C" or the abbreviation "L.L.C." |
| Enter new principal offices address, if applie  | cable:   |  |
| (Principal office address MUST BE A STREI   | ET ADDRESS)  |  |
| Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE       | <u>BOX)</u>  | 22 F   |
| B. If amending the registered agent and registered agent and/or the new registered of |  | s on our records, enter the name of the              |
| Name of New Registered Agent:   | LIDYCE IVETH MARTINE   | EZ RODRIGUEZ   |
| New Registered Office Address:  | 602 20TH AVE W   |  |
|   | Ente   | r Florida street address                             |
|   | BRADENTON  | , Florida 34205                                      |
|   | City   | Zip Code   |

## New Registered Agent's Signature, if changing Registered Agent:

CARONIAL CARON CATRACHO LLC

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, 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          | MARIA DE LA CRUZ HERNANI | 222 34TH AVE DR E   | Add            |
|              |                          | BRADENTON, FL 34208 | ■ Remove       |
|              |                          |                     | Change         |
| MGR          | LIDYCE IVETH MARTINEZ    | 602 20TH AVE W      | Add            |
|              |                          | BRADENTON, FL 34205 | □ Remove       |
|              |                          |                     | Change         |
|              |                          |                     |                |
|              | ,                        |                     | Remove         |
|              |                          |                     | □ Change       |
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|  | _                              |                               |                                    |                                      |  |                   | <u>— გ</u>                 |
| . Effective date, if other than the (If an effective date is listed, the date in Note: If the date inserted in this document's effective date on the | ust be specific<br>Jock does n | and cannot be pot meet the ap | prior to date of<br>plicable statu | filing or more t<br>story filing rec | (optionan 90 days after puirements, this | tiling.) Pursuant | to 605.020<br>be listed a: |
| the record specifies a delayon<br>the 90th day after the re  | ed effectiv<br>cord is file    | e date, but<br>ed.            | not an eff                         | ective time                          | , at 12:01 a                             | i.m. on the       | earlier o                  |
| Dated MAY 17   |                                | 2023                          |                                    |                                      |  |                   |                            |
|  |                                |                               |                                    |                                      |  |                   |                            |
|  |                                |                               |                                    |                                      |  |                   |                            |

Page 3 of 3

Filing Fee: \$25.00