

L23000109309

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

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09/25/23--01010--003 **30.00

2023 SEP 25 PM 5:45

cf 10/12/2023

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: BRAZAS CHICKEN EXPRESS 2 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:

RAFAEL CATARI

Name of Person

PREMIER TAX & ACCOUNTING CONSULTANTS INC

Firm/Company

12301 LAKE UNDERHILL ROAD STE 257

Address

ORLANDO, FL 32828

City/State and Zip Code

RALPH@TRHFIN.ORG

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

For further information concerning this matter, please call:

RAFAEL CATARI

407 392-1488

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

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

BRAZAS CHICKEN EXPRESS 2 LLC

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

2023 SEP 25 PM 5:45

The Articles of Organization for this Limited Liability Company were filed on 03/01/2023 and assigned
Florida document number L23000109309.

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) _____

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: _____

New Registered Office Address: _____

Enter Florida street address

_____, **Florida**

City

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.

If Changing Registered Agent, Signature of New Registered Agent

MGR = Manager
AMPR = Authorized Member

AMRR = Authorized Member

Title	Name	Address	Type of Action
AMBR	WENDY FEDELE	263 TAMAR CT	<input checked="" type="checkbox"/> Add
		ST. AUGUSTINE, FL 32095	<input type="checkbox"/> Remove
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[illegible]

(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)

Dated 09-19-2023

FRANCISCO DELSOLAR

Filing Fee: \$25.00