23000169430

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
UMILS

900431144399

06/11/24--010/02--011 **25.00



Office Use Only

COVER LETTER

TO: **Registration Section Division of Corporations**

EL JARDIN DE LOS SABORES LLC

,

SUBJECT:

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:

CEASAR MESTRE JR., ESO.

Name of Person

GASTESI, LOPEZ & MESTRE P.L.L.C

Firm/Company

8105 NW 155 STREET

Address

MIAMI LAKES, FL 33016

City/State and Zip Code

MESTRE@GLMLEGAL.COM

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

For further information concerning this matter, please call:

.305-CEASAR MESTRE JR., ESQ. 825-9988 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

Street Address: **Registration Section Division of Corporations** The Centre of Tallahassee

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

EL JARDIN DE LOS SABORES 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 04/05/2023 and assigned Florida document number 12300016940

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 Liabi	lity Company," the designation "L	LC" or the abbre ここの		'L.L.C."
Enter new principal offices address, if applicable:	14627 SW 42 ST	드린	024、	
(Principal office address MUST BE A STREET ADDRESS)	MIAMI, FL 33174	•	UN	11
		•		f mint a
		· (AH	;-19 ;-19
Enter new mailing address, if applicable:			<u>.</u>	+
(Mailing address MAY BE A POST OFFICE BOX)		، ا	မြ	

B. If amending the registered agent and/or registered office address on our records, <u>enter the name of the new registered agent and/or the new registered office address here</u>:

Name of New Registered Agent:	LAZARO RODRIGUEZ		
New Registered Office Address:	14627 SW 42 ST		
	Enter Florida street address		
	MIAMI	, Florida ³³¹⁷⁴	
	Cit	Zip C	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

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person being added</u> or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
MGR	LAZARO RODRIGUEZ	14657 SW 42 ST, MIAMI, FL 33174	🖹 Add
			🗆 Remove
			Change
MGR	MARICELA LOPATEGUI	14657 SW 42 ST, MIAMI, FL 33174	🗐 Add
			🗆 Remove
			□Change
MGR	ARISTIDES SUAREZ	10340 SW 7th terrace	∠_ □Add
		Miami; F1 33174	Remove
			🗌 Change
			🗆 Add
			🗆 Remove
			🗆 Change
			□ Ađd
			🗆 Remove
			Change
			🗆 Add
			🗆 Remove
			□Change

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

. .

· · · · · · · · · · · · · · · · · · ·		
· · · · · · · · · · · · · · · · · · ·		
· · · · · · · · · · · · · · · · · · ·	<u> </u>	····

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 tiling 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	5/30 2024.
	Signature of a member or authorized representative of a member
	Ansticks Survez Typed or printed name of signee