

# L23000170219

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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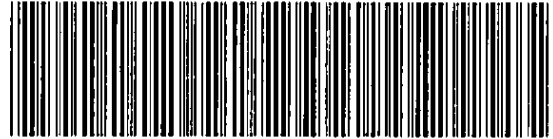
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(Document Number)

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TALLAHASSEE, FL

# ZARCO EINHORN SALKOWSKI

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September 25, 2024

## Via Federal Express

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

Re: Truetworks Hospitality Group LLC  
Articles of Amendment to Articles of Organization  
Florida Document No. 1.23000170219

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2024 SEP 30 AM 10:02  
TALLAHASSEE, FL

To whom it may concern:

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

- (i) The Articles of Amendment to Articles of Organization for Truetworks Hospitality LLC; and
- (ii) a check for \$25.00 for the filing fees associated with the amendment.

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

Very truly yours,



Nadia Espinosa  
Paralegal to Kaari Gagnon, Esq

Encl.

# COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: TRUEWORKS HOSPITALITY 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 PA

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

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2024 SEP 30 AM 10:02  
TALLAHASSEE, FL

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

TRUEWORKS HOSPITALITY 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 April 5, 2023 and assigned  
Florida document number L23000170219.

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:

Zarco Einhorn Salkowski P.A.

New Registered Office Address:

2 S. Biscayne Blvd., 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

09/30/2024 10:02 AM  
**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 Cruz	3900 NW 2nd Street	<input type="checkbox"/> Add
		Miami, FL 33126	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Cruz Hospitality Group LLC	11337 SW 74th Terrace	<input checked="" type="checkbox"/> Add
		Miami, FL 33173	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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

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2024 SEP 30 AM 10:02

WILLIAMS SEE IT

**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 filing 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 September 17, 2024

DocuSigned by:

FICA:C4533:CB40Y

Signature of a member or authorized representative of a member

Rasiel Reyes, Manager

Typed or printed name of signee

**Filing Fee: \$25.00**