## L23000344156

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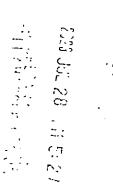
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## **COVER LETTER**

Tallahassee, FL 32314

TO:	Registration So Division of Cor		3				
CUBIL	C>7**	Fuego Empandas, LLC					
SUBJEC	Ç1:	Name of Lim	ited Liability Company	<del> </del>			
The encl	losed Articles of	Amendment and fee(s) are sub	mitted for filing.				
Please re	aurn all correspo	ondence concerning this matter	to the following:				
		Christina Muntero					
			Name of Person				
		Christina's Fuego Empand	as				
		Firm/Company					
		808 Heather Woel Court Apt 303					
	Address						
		Brandon, Fl 33510					
		City/State and Zip Code					
		info@thebookssolution.net  E-mail address: (to be used for future annual report notification)					
For furth	ner information o	concerning this matter, please c	·	incation)			
		<u> </u>	at ()	ne Telephone Number			
	Name C	of Person	Area Code Daytin	ie Telephone Number			
Enclosed	d is a check for t	he following amount:					
<b>■ S25</b> .	.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		Street Address:	ation			
Registration Section Division of Corporations P.O. Box 6327		Registration Se Division of Co					
		The Centre of					

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Christina's Fuego Empandas, 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  $\frac{07/20/2023}{1}$ and assigned Florida document number 1.23000344156 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: Christina's Fuego Empanadas, LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." 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

## 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, 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
			□Add
			Remove
			☐ Change
			□Add
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	nding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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(If an effe <u>Note:</u>	tive date, if other than the date of filing:
f the record ecord is file	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 d.
Dated_	7/24/2023
	Christing Manual Signature of a member or authorized representative of a member
	Christina Montero
	Typed or printed name of signee

Filing Fee: \$25.00