40000037535

| (Red | questor's Name) | |
|---------------------------|-------------------|-------------|
| (Add | dress) | |
| (Add | dress) | |
| (City | y/State/Zip/Phone | e #) |
| PICK-UP | ☐ WAIT | MAIL |
| (Bu | siness Entity Nan | ne) |
| (Doc | cument Number) | |
| Certified Copies | _ Certificates | s of Status |
| Special Instructions to f | Filing Officer: | |
| | | |
| | | |
| | | |

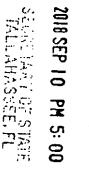
Office Use Only



800318223178

09/10/18--01003--019 ++25.00





COVER LETTER

| TO: | Registration Se Division of Cor | | | |
|---------------|------------------------------------|--|---|--|
| CHD IE | Coqui Pro, | LLC | | |
| SUBJE | CI: | Name of Limi | ited Liability Company | |
| | | Amendment and fec(s) are submodence concerning this matter | | |
| r lease o | etam an correspo | Dario Peretti | to the following. | |
| | | Green Life Realty, INC. | Name of Person | |
| | | 14331 SW 120 St, Unit 1 | Firm/Company | |
| | | Miami, FL 33186 | Address | |
| | | info@greenlife-llc.com | City/State and Zip Code | • |
| For furt | her information co | E-mail address: () oncerning this matter, please ca | to be used for future annual report notifiall: | ication) |
| Dario F | Peretti | | 305 386-9190 | |
| | Name of | f Person | Area Code Daytime | Telephone Number |
| Enclose | d is a check for th | ne 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/COURIER ADDRESS:

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

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

FILED 2018 SEP 10 PM 5: 00

Coqui Pro, LLC

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

| The Articles of Organization for this Limited Liability Con | npany were filed on 04/07/20 | 10 and | d assigned |
|--|-------------------------------------|-----------------------------|---------------|
| Florida document number L10000037535 | | | |
| This amendment is submitted to amend the following: | | | |
| A. If amending name, enter the new name of the limited | d liability company here: | | |
| The new name must be distinguishable and contain the words "Limited | I Liability Company." the designati | on "LLC" or the abbreviatio | n "L.L.C." |
| Enter new principal offices address, if applicable: | | | |
| (Principal office address MUST BE A STREET ADDRES | <u>SS)</u> | | |
| Enter new mailing address, if applicable: | | | |
| (Mailing address MAY BE A POST OFFICE BOX) | | | |
| maining dutiess MAT BL A TOST OF FICE DON | | | |
| B. If amending the registered agent and/or registered agent and/or the new registered office address Name of New Registered Agent: | | records, enter the na | me of the new |
| B. If amending the registered agent and/or register registered agent and/or the new registered office address Name of New Registered Agent: | | records, enter the na | me of the new |
| B. If amending the registered agent and/or registered agent and/or the new registered office address | | | me of the new |
| B. If amending the registered agent and/or register registered agent and/or the new registered office address Name of New Registered Agent: | Enter Florida stre | vi address | |
| B. If amending the registered agent and/or register registered agent and/or the new registered office address Name of New Registered Agent: | Enter Florida stre | | |
| B. If amending the registered agent and/or register registered agent and/or the new registered office address Name of New Registered Agent: | Enter Florida stre | vi address | |

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 | Gazze, Jorge Luis | | |
| | | 14331 SW 120 ST #101, | |
| | | Miami, FL 33186 | ■ Remove |
| | | - | Change |
| MGR | Gazze, Omar Antonio | | □ Add |
| | | 14331 SW 120 ST #101, | |
| | | Miami, FL 33186 | ■ Remove |
| | | | Change |
| MGR | Peretti, Dario | 14331 SW 120 St #101, Miami, FL 33186 | |
| | | | Remove |
| | | | ☐ Change |
| | | | |
| | | | Remove |
| | | | □ Change |
| | | | Add |
| | | . | ☐ Remove |
| | | | Change |
| | · · · · · · · · · · · · · · · · · · · | | Add |
| | | | □ Remove |
| | | | ☐ Change |

| | | | | | |
|--|--|-------------------|---------------------------|---|---------------------------------|
| • | | | | | |
| | | | | | |
| - | | | | | |
| | | | | | |
| | | | | | |
| . | | | | | |
| | <u>. </u> | | | • | |
| | | | | | |
| | | | ··· • | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | _ | | - |
| | | | | | |
| | | | | | |
| | | | | , | |
| | | | | | |
| | | | | | |
| | | | <u> </u> | | <u></u> |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | • | |
| Effective date, if other that fan effective date is listed, the date | n the date of filin | g: | date of filing or more | (optionates and the second control of t | d) ng) Pursuant to 605 0207 |
| Note: If the date inserted in the | his block does not r | meet the applicab | | | |
| document's effective date on t | the Department of S | State's records. | | | |
| | | | | | |
| | | | in effective tim | e, at 12:01 a.n | n. on the earlier of |
| | | • | | | |
| | e record is med. | | | | |
| The 90th day after the | e record is med. | 2018 | | | |
| ne record specifies a del The 90th day after the September 5th | | 2018 | · M1 — | | |
| The 90th day after the | | 2018 Todanal | At - | | |
| The 90th day after the | Signatute of a | Coolet | d ed representative of | a member | |
| The 90th day after the | | Coolet | ed representative of | a member | |

Page 3 of 3

Filing Fee: \$25.00