

L23002831665968

Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : REAL DREAMS USA LLC
Account Number : I20220000065
Phone : (786)420-1297
Fax Number : (786)226-0501

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: info@realdreams-usa.com

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2023 AUG 15 PM 1:38

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
CLEAN WORK ROSARIO LLC**

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

2023 AUG 15 AM 11:20

ARTICLES OF AMENDMENT (((H23000283166 3)))
TO
ARTICLES OF ORGANIZATION
OF

CLEAN WORK ROSARIO 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 04/26/2023 and assigned
 Florida document number L23000205968.

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

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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>
AP	LLOP, AYMARA A. SRA	1850 S OCEAN DRIVE	<input type="checkbox"/> Add
		MIAMI, FL 33009	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	TOZZI, DIEGO	1850 S OCEAN DRIVE	<input checked="" type="checkbox"/> Add
		1702 TOWER 1	<input type="checkbox"/> Remove
		MIAMI, FL 33009	<input type="checkbox"/> Change
MGR	LLOP, AYMARA	1850 S OCEAN DRIVE	<input checked="" type="checkbox"/> Add
		1702 TOWER 1	<input type="checkbox"/> Remove
		MIAMI, FL 33009	<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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