Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (050) 617-6383

From;

Account Name : J. LUIS QUINTANA & ASSOCIATES

Account Number : 120070000041

Phone

: (305)446-0300

Fax Number

: (305)446-2070

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

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Electronic Filing Menu

Corporate Filing Menu

Help

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

#15-6001812643

	nited Liability Com (A Plorida Limite	pany as it now appears on ou d Liability Company)	r records.)
The Articles of Organization for this Limited	Liability Compar	ny were filed on 05/25/200	1 and assigned
Florida document number L01000008430		•	•
			•
This amendment is submitted to amend the fo	llowing:		
A. If amending name, enter the new name	of the limited lia	bility company here:	
The new name must be distinguishable and contain the	words "Limited Lia	bility Company," the designation	on "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if appl	icable:	N/A	
(Principal office address MUST BE A STRE			
	,		
Enter new malling address, if applicable:			
(Mailing address MAY BE A POST OFFICE	F RAY		
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			ecords, enter the name of the
			ecords, enter the name of the
registered agent and/or the new registered	office address h		ecords, enter the name of the
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registered agent and/or the new registered	office address h		ecords, enter the name of the
registered agent and/or the new registered agent.	office address h		
registered agent and/or the new registered agent.	office address h	<u>ere</u> :	ol oddress
, , , , , , , , , , , , , , , , , , , ,	office address h	<u>ere</u> :	
registered agent and/or the new registered agent.	office address he	Enter Florida stree	ol oddress
registered agent and/or the new registered of New Registered Agent: New Registered Office Address:	N/A Registered Agented agent and agent and complegistered agent as	Enter Florida stree City It: gree to act in this capacite performance of my dustree in Chapte	or address , Florida Zip Code Ty. I further agree to comply with the comple with and a second comple with and the control of this document.

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>	Type of Action
MGR	Quintana Retail Holdings, Inc.	338 Minorca Avenue	
		Coral Gables, FL 33134	☐ Remove
	·		■ Change
MGR	Quintana Retail Holdings, Inc.	1805 Ponce de Leon Blvd.,	Ste 200 ■ Add
•		Coral Gables, FL 33134	□ Remove
			□ Change
			DAdd □
			☐ Remove
			☐ Change
			D Add
			□ Remove
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Effective date if other than the date of filing: (ontional)					-
Effective date, if other than the date of filing:	nt to 605.020 t be list e d as	(optional) han 90 days after filing.) Pursuant to quirements, this date will not be	able statutory filing rec	this block does not meet the	Note: If the date inserted i
he record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the The 90th day after the record is filed.	≥ earlier o	e, at 12:01 a.m. on the ea	et an effective time		

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Typed or printed name of signee

J. Luis Quintana

Filing Fee: \$25,00

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