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TALL AHASSEE FLORIN

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COVER LETTER

	ision of Corp			
SUBJECT:		MANAGEMENT LLC		
SUBJECT.		Name of Limi	ited Liability Company	· · · · · · · · · · · · · · · · · · ·
The enclosed	d Articles of A	Amendment and fee(s) are subr	mitted for filing.	
Please return	all correspor	ndence concerning this matter t	to the following:	
		ALVARO CASTILLO B.		
			Name of Person	
		CASTILLO & ASSOCIAT	TES	
			Firm/Company	
		1390 BRICKELL AVENU	E SUITE 200	
			Address	
		MIAMI, FLORIDA 33131		
			City/State and Zip Code	· ·-
		ALVARO@ALVAROCAS		
		E-mail address: (t	o be used for future annual report notifica	ition)
For further in	nformation co	ncerning this matter, please ca	ill:	
CARMEN P	PARACCHIN	I	305 371-5540 at ()	
	Name of	Person	Area Code Daytime T	elephone Number
Enclosed is a	check for the	e following amount:		
■ \$25.00 F	iling 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

EZKANDA MANAGEMENT, 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 10/05/2010 and assigned	
Florida document number $\frac{1.10000104141}{}$.		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ulity company here:	
QRA BRICKELL, LLC The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "1.1.C" or the abbreviation "L.1C."	
Enter new principal offices address, if applicable:	2525 SW 3RD AVENUE (1511)	
(Principal office address MUST BE A STREET ADDRESS)	MIAMI, FLORIDA 33129	
Enter new mailing address, if applicable:	2525 SW 3RD AVENUE (1511)	
(Mailing address MAY BE A POST OFFICE BOX)	MIAMI, FLORIDA 33129	
B. If amending the registered agent and/or registered o	· · · · · · · · · · · · · · · · · · ·	
registered agent and/or the new registered office address her	<u>e:</u> As	
Name of New Registered Agent: PATRICI	A QUINTANA	
New Registered Office Address: 2333 BRI	CKELL AVENUE, SUITE DE	
MIAMI	Enter Florida street address	
<u> MIAMI</u>	City Florida 33129 11	
New Registered Agent's Signature, if changing Registered Agent:	IDA	
	ee to act in this capacity. I further agree to comply with the	

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	LUIS R BETHENCOURT	2333 BRICKELL AVENUE	
		SUITE D-1	■ Remove
		MIAMI, FLORIDA 33129	☐ Change
			☐ Remove
			☐ Change
			□ Add
			Remove
			□ Change
			□ Add
		 	☐ Remove
			☐ Change
	•=		🗖 Add
			□ Remove
			☐ Change
			Add
			Remove
			Change

If ame	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)	
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lote:	tive date, if other than the date of filing: [coptional] (optional) (optiona	0207
	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier egoth day after the record is filed.	r of
ated	December 4. 2015	
	Signature of a member or authorized representative of a member	
	Joseba A. Quintana, Managing Member	
	Typed or printed name of signee	

Page 3 of 3

Filing Fee: \$25.00