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Division of Corporations

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: (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (614)280-3338

Esy Mumber : (954

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SECRETARY OF STATE

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21 MAY 20 PM 2:

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN QUADRUM MIAMI BEACH, LLC

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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ARTICLES OF ORGANIZ OF	ATION
· ·	·
Quadrum Miami Beach LLC	
( <u>Name of the Limited Liability Company as it now ap</u> (A Florida Limited Liability Compa	ng)
he Articles of Organization for this Limited Liability Company were filed or	03-24-2011 and assigned
Torida document number 1.4+000035717	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability compan	y here:
The new name must be distinguishable and comain 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)	22 7
	55 - M
	ma K O
Enter new mailing address, if applicable:	
Mailing address MAY BE A POST OFFICE BOX)	M 02
Market a north age	
<ol> <li>If amending the registered agent and/or registered office address on or gent and/or the new registered office address here:</li> </ol>	ur records, <u>enter the name of the new register</u>
Name of New Registered Agent:	
New Registered Office Address:  Enter	-Floridastreetaddress
• • • • • • • • • • • • • • • • • • • •	
	, Florida Zip Cock

## New Registered Agent's Signature, if changing Registered Agent:

Thereby 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.

To: 18506176383 \* Page: 4 of 5 2021-05-20 12:35:38 CST 16144554862 From: James Tanks III

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

Title	Name	<u>Address</u>	Type of Action
Director	Javier Egipciaco	c/o Quadrum Global	□Add
		407 Lincoln Road Suite 304	
		Miami Beach, FL 33139	□Change
Director	Amir Setayesh	e'o Quadrum Global	■Add
		407 Lincoln Ruad State 304	□Remove
		Miami Beach, FL 33139	CREMOVE 20021
			20.1
			ORemove
			DAdd
			□Remove
			□Change
			□Add
			Remove
			□Change
	····		□Add
		-	Change

To: 18506176383

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) (optional) E. Effective date, if other than the date of filing: \_\_\_ (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605,0207 (5)(b) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. If the record 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 record is filed Signature of a member or authorized representative of a member Bryan Davis

Typed or printed name of signee