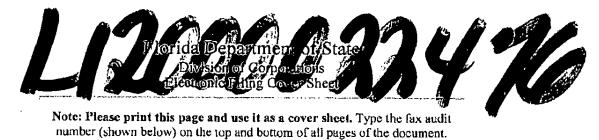
Division of Corporations

Page 1 of 1



(((H15000240676 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : GREENSPOON MARDER, P.A.

Account Number: 076064003722

Phone : (888)491-1120

Fax Number : (954)343-6962

Enter the email address for this business entity to be used for fixure annual report mailings. Enter only one email address please Email Address: lecoll@grupoalco.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN **ZUREAQUA, LLC**

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\$25.00

Electronic Filing Menu

Corporate Filing Menu

Help

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

H15000240676

ZUREAQI (Name of the Limited Liability Compan (A Florida Limited Li		on our records.)	
The Articles of Organization for this Limited Liability Company vi Florida document number			and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liabil	lity company here	· •	
The new name must be distinguishable and contain the words "Limited Liability	ty Company," the desi	ignation "LLC" or the abbi	reviation "L.L.C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)			
Enter new mailing address, if applicable:			2015 OC SECRE VALLAH
(Mailing address MAY BE A POST OFFICE BOX)	. 		SA SA
B. If amending the registered agent and/or registered off registered agent and/or the new registered office address here		our records, enter (To Description of the her
Name of New Registered Agent:			·
New Registered Office Address:			
	Enter Florid	a street address	
	<u>.</u>	, Florida	
	City	<u> </u>	Zip Coda
New Registered Agent's Signature, if changing Registered Agent:			
I hereily appare the apparentment of made and a set of a second		market I Coultry	. 7 1.1 .1

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

Page 1 of 3

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	<u>Name</u>	Address	Type of Action
MGR	Gustavo E. Coll	1700 E. Las Olas Blvd	
		Suite 307	Remove
		Fort Lauderdale, FL 33301	☐ Change
MGR	Luís Enrique Coll Mazzei	1300 SE 17th Street	
		Suite 210	☐ Remave
		Fort Lauderdale, FL 33316	Change
MGR	Laura Pensa	1300 SE 17th Street	Add
		Suite 210	A S Page ove
		Fort Lauderdale, FL 33316	CRE CREW
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recon The 90	d specifies a Oth day after	delayed effo the record i	ective date, b s filed.	ut not an effect	ive time, at 1	2:01 a.m. on the	e earlier of:	
	October	7	2015	75				
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Page 3 of 3

Filing Fee: \$25.00