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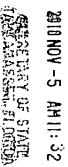
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COVER LETTER

TO: Registration S Division of Co					
QUANTU SUBJECT:	M 516 & 2012 LLC				
30D31.CT.	Name of Lim	ited Liability Company			
	Amendment and fee(s) are sub	_			
	Jonathan Teboul				
		Name of Person			
		Firm/Company			
	20533 BISCAYNE BLVD #168).			
		Address			
	Aventura, FL 33180				
	jt@managementmiami.com			NAT BEST OF THE	TH.
For further information of	E-mail address: (concerning this matter, please co	to be used for future annual repo all:	rt notification)	ည်းသုံး က	
Jonathan Teboul		305 305-53	23	AM II: 32 OF STATE OF FLORIDS	
Name o	of Person		Daytime Telephone Number	夏州 公	
Enclosed is a check for t	he following amount:				
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy radditional copy is enclosed	Certified (of Status &	

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

QUANTUM 516 & 2012 LLC			
(Name of the Limited (A	Liability Company as it now appears on our records.) Florida Limited Liability Company)		
The Articles of Organization for this Limited Liab	pility Company were filed on (19/26/2013	and ass	signed
Florida document number L13000136413	·		
This amendment is submitted to amend the follow	ring:		
A. If amending name, enter the new name of the	he limited liability company here:		
The new name must be distinguishable and contain the word	ds "Limited Liability Company," the designation "LLC" or the	abbreviation "L	.L.C."
Enter new principal offices address, if applicab	ole:		
(Principal office address MUST BE A STREET).	ADDRESS)	_	
			
Enter new mailing address, if applicable:		 _	
Mailing address MAY BE A POST OFFICE BO	<u></u>		
		福兰	
	registered office address on our records, enter	製 8	-17
B. If amending the registered agent and/or	registered office address on our records, enter	I	y .
registered agent and/or the new registered offic	ce address nerc:		
		PAR PAR	
Name of New Registered Agent:			
New Registered Office Address:		<u> </u>	5) 3
	Enter Florida street address		
	, Florida _		
	Cin	Zin Carla	

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

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>	Address	Type of Action
AMBR	Jonathan Teboul	20533 BISCAYNE BLVD. #168	
		Aventura, FL 33180	
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effective date, if other than the date of filing: (op effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days at	tional)	
If the date inserted in this block does not meet the applicable statutory filing requirements, t iment's effective date on the Department of State's records.	his date will no	am to 60 ot be lis
ecord specifies a delayed effective date, but not an effective time, at 12:01 ne 90th day after the record is filed.	. a.m. on th	e earl
te sour day arter the record is med.		
10/31/2018 d		
·		
Signature of a member or authorized representative of a member		

Page 3 of 3

Filing Fee: \$25.00