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### Florida Department of State

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: (305)358-1310

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#### LLC AMND/RESTATE/CORRECT OR M/MG RESIGN LA MARQUEZA FARM, LLC

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#### ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

LA MARQUEZA FARM LLC			2021	SIV
(Name of the Limited Liability Company as (A Florida Limited Liability	t now soucars on our re y Company)	cards.)	0C1	OW I
The Articles of Organization for this Limited Liability Company were	filed on 12/13/2013		and assigne	400 A
Florida document number L13000172525			AM 10:	ميرة ساد
This amendment is submitted to amend the following:	•		<u>5</u>	
A. If amending name, enter the new name of the limited liability of	ompany here:			l ·
The new name must be distinguishable and contain the words "Limited Liability Co	mpany," the designation "	LLC" or the abbres	iation "L.L.C."	1
Enter new principal offices address, if applicable:				, manadas y a
(Principal office address MUST BE A STREET ADDRESS)				<del></del>
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	·			
Enter new mailing address, if applicable:	•		· · · · · · · · · · · · · · · · · · ·	<del></del>
(Mailing address MAY BE A POST OFFICE BOX)			<del></del>	<del></del> .
		Fig with Price of the State of the Post of the Po	· ·-··· · · · · · · · · · · · · · · · ·	<del></del> .
B. If amending the registered agent and/or registered office addre	ss on our records, <u>en</u>	ter the name of	the new res	<u>zistere</u> :
agent and/or the new registered office address here:				
Name of New Registered Agent:				·
New Registered Office Address:				
	Enter Florida street ad	dress .		
		Florida		
· · · · · · · · · · · · · · · · · · ·	ילי		up Code	<del></del>
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 amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

<u>Title</u>	Name	Address	Type of Action
MGR	BEATRIZ SAMANO F.	1200 BRICKELL AVENUE #505	
		MIAMI, FL 33131	Remove
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	JARANO RESTREPO	MANAGER	100%	
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<u>e:</u> If the date inserte	ed in this block does not meet	not be prior to date of filing or more the applicable statutory filing re	than 90 days after filing.) Pursuar equirements, this date will not	to 605 02 be fisted
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cord specifies a delay	yed effective date, but not an e	effective time, at 12:0) a.m. on t	the earlier of: (b) The 90th d	lay after th
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