Division of Corporations **Electronic Filing Cover Sheet** 

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To:

Division of Corporations

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7/21/2015 1:11:43 PM From: To: 8506176383( 2/4 )

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

qFuturo, LLC		<del></del>
(Same of the Limited Link) (A Florid	lity Company as it now appears on our records.) da Limited Liability Company)	
The Articles of Organization for this Limited Liability Florida document number <u>L15000106414</u>	Company were filed on June 22, 2015	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lin	nited liability company here:	
The new name must be distinguishable and end with the words "I.	imited Liability Company," the designation "LLC" o	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	2627 South Bayshore Drive #2303	j
(Principal office address MUST BE A STREET ADD	RESS) Miami, FL 33131	
Enter new mailing address, if applicable:	2627 South Bayshore Drive #2303	
(Mailing address MAY BE A POST OFFICE BOX)	Miami, FL 33131	20 ≥o∵20
		75 C
B. If amending the registered agent and/or regi		77. 10.
B. If amending the registered agent and/or registered agent and/or the new registered affice ad-	istered office address on our records, <u>s</u> dress here:	
Name of New Registered Agent:		
New Registered Office Address:		इति 🏲
	Enter Florida street address	
	, Floric	
	City	7.ip Code

## 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

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If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

Title	No man	Address	Town of Assiss
<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
			□ Add
		**************************************	□ Remove
			Add
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		☐ Remove	
			F3
<del></del>			□ Add
		<del></del>	□ Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

E. Effective date, if other than the date of filing:

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated

Signature of a member or authorized representative of a member

Gabriel Sanchez Zinny, Authorized Member

Typed or printed name of signce

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2015 JUL 21 AM & 24