

L18000263017

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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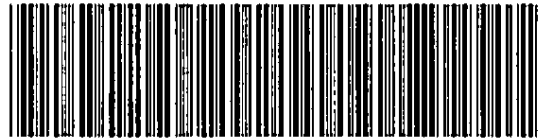
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FL

JAN 17 2020

C Kinsey

COVER LETTER

**TO: Registration Section &
Division of Corporations**

SUBJECT: QUALIFIED OPPORTUNITY INVESTMENT FUND, LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

PEDRO A. MEDINA

Name of Person

RENAISSANCE TRAINING & CONSULTING, LLC

Firm/Company

2485 NW 43RD STREET

Address

BOCA RATON, FL 33431

City/State and Zip Code

pmedina59@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

PEDRO A. MEDINA 561 843-3150
_____ at (_____) _____
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- ☒ \$25.00 Filing Fee ☐ \$30.00 Filing Fee & Certificate of Status ☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) ☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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

Qualified opportunity investment fund, LLC
(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on November 09, 2018 and assigned
Florida document number L18000263017.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain 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)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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CLERK OF CIRCUIT COURT
JACKSONVILLE, FLORIDA

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

Florida

City

Zip 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

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> | <u>Address</u> | <u>Type of Action</u> |
|--------------|----------------------------|---------------------------|---|
| MGR | PEDRO A. MEDINA | 2485 NW 43RD STREET | <input checked="" type="checkbox"/> Add |
| | | BOCA RATON, FL 33431-8415 | <input type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Change |
| AMBR | MARIANNE SENNYEY DE MEDINA | 2485 NW 43RD STREET | <input checked="" type="checkbox"/> Add |
| | | BOCA RATON, FL 33431-8415 | <input type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Change |
| | | | <input type="checkbox"/> Add |
| | | | <input type="checkbox"/> Remove |
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Pedro A. Medina, as Manager of the Qualified Opportunity Investment Fund, LLC, and Marianne Sennyey de

Medina, as Member of the said LLC, are hereby given full power and authority, individually or jointly, to:

1. Represent this LLC in all affairs, including the purchase of property and interests in qualified opportunity zones.
2. Execute, acknowledge and deliver any and all contracts, debts, leases, assignments of mortgage, extensions of mortgage, satisfactions of mortgage, releases of mortgage, subordination agreements and any other instrument or agreement of any kind or nature whatsoever, in connection therewith, and affecting any and all property presently or hereafter acquired by this LLC, located anywhere.
3. To encumber, lease, mortgage, assign, recover, receive, sell and acquire any property on behalf of this LLC.
4. To make, execute, endorse, accept, deliver and issue in the name of this LLC all checks, notes, drafts, warrants, acknowledgments, agreements, powers of attorney and all other instruments in writing.
5. To enter into and take possession of any lands, real estate, tenements, houses, apartment units, stores or buildings, or parts thereof, belonging to this LLC that may become vacant or unoccupied, or to the possession of which this LLC may be or may become entitled, and to receive and take in the name of this LLC all or any rents, profits or issues of any real estate belonging to this LLC and its qualified opportunity zone operations.
6. To take all steps and remedies necessary for the proper conduct and management of the business affairs of this LLC, and for the recovery, receiving, obtaining and holding possession of any property, interest or debts.

E. Effective date, if other than the date of filing: _____ (optional)

(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 (3)(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.

Dated December 12,

2019

Signature of a member or authorized representative of member

Pedro A. Medina

Marianne J. Sennyey de Medina

Typed or printed name of signee

Filing Fee: \$25.00