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## **COVER LETTER**

TO:

**Registration Section** 

Tallahassee, FL 32314

Div	ision of Cor	porations	,	
eunirer	Medellin D	reams LLC		
SUBJECT:	<u> </u>	Name of Lin	nited Liability Company	·
The enclosed	l Articles of	Amendment and fee(s) are sub	omitted for filing	
			_	
r lease return	i an correspo	ondence concerning this matter	to the following:	
		Sebastian Zapata		
			Name of Person	
			Firm/Company	
		18855 nw 63 ct		
			Address	
		Miami,FL 33015		
			City/State and Zip Code	
		djbassto@gmail.com		
			to be used for future annual report not	ification)
For further in	offermation c	oncerning this matter, please c	all:	
Sebastian Z	Zapata		786 7284511 at ( )	
	Name of	f Person		ne Telephone Number
Enclosed is a	check for th	e following amount:		
□ \$25.00 F	iling 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)
	ling Address		Street Address:	
-	gistration S	ection orporations	Registration Se	
	Box 632		Division of Co The Centre of 1	•

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Medellin Dreams 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 6/25/2019 Florida document number L19000166270 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 "LLC." 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) 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: Sebastian Zapata Quintero Name of New Registered Agent: 18855 nw 63 ct Miami, FL 33015 New Registered Office Address:

#### 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.

City

Miami

If Changing Registered Agent, Signature of New Registered Agent

Enter Florida street address

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	Sebastian Zapata Quintero	18855 nw 63 ct Miami,FL 33015	≣Add
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Page 3 of 3

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