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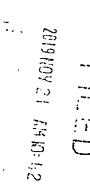
(Requestor's Name)			
(Address)			
(Address)			
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PICK-UP	☐ WAIT	MAIL	
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(Document Number)			
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COVER LETTER

TO: Registration Division of C		, , , , , , , , , , , , , , , , , , ,	
SUBJECT:T	QF 7849 LLC Name of Limi	ited Liability Company	
The enclosed Articles of	of Amendment and fec(s) are sub-	mitted for filing.	
Please return all corres	pondence concerning this matter	to the following:	
	Arida	Y Ramos Name of Person	
	TQF 78	549 LLC Firm/Company	
	3080	SW 8 St Address	
	Miam	II FL 33135 City/State and Zip Code	
	tof constru E-mail address: (1	ction @gmail.com	fication)
For further information	concerning this matter, please ca	ıll:	
Ariday 1	Ramos of Person	at (<u>305</u>) <u>302 -</u> Area Code Daytim	e 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/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	849 LLC ility Company as it now appears on our records.) da Limited Liability Company)
	Company were filed on 11 05 2019 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 contain the words "Lie Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADD	mited Liability Company," the designation "LLC" or the abbreviation "L.L.C." **DRESS** **DRESS**
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	20 NO T
B. If amending the registered agent and/or regi	istered office address on our records, enter the name of-the new
registered agent and/or the new registered office ad	dress 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>	Type of Action
MGR	Yudy Ramos	3080 SW 8 St	□ ∧dd
	Miami, FL 33135	□ Remove	
			Change
		□ Add	
			Pemove
	 	Change	
			Add
		□ Remove	
			Change
			Remove
			Change
		Add	
		Remove	
		Change	
		Add	
		□ Remove	
			Change

D. If amending any other information, enter change(s) here: (At	tach additional sheets, if necessary.)
· · · · · · · · · · · · · · · · · · ·	
	
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	-
	
E. Effective date, if other than the date of filing: (If an effective date is listed, the date must be specific and cannot be prior to date Note: If the date inserted in this block does not meet the applicable st document's effective date on the Department of State's records.	
If the record specifies a delayed effective date, but not an (b) The 90th day after the record is filed.	effective time, at 12:01 a.m. on the earlier of:
Dated November 19 2019	
\mathcal{O}_2 . \mathcal{Q}	90
Signature of a member or authorized	epresentative of a member
Ariday Rat Typed or Printed nam	nos not signed

Page 3 of 3

Filing Fee: \$25.00