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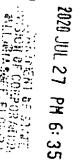
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COVER LETTER

1-1-4

Tallahassee, FL 32314

TO: Registration Section Division of Corpora	
	ERQUIN_LLC
SUBJECT:	Name of Limited Liability Company
The conditional Amelian of Sassi	and a constant of the second constant of the
The enclosed Afficies of Affic	endment and fee(s) are submitted for filing.
Please return all corresponder	nce concerning this matter to the following:
	^ <i>^</i>
_	Sergio A. Wintero
	Name of Person
	Herquin LLC
-	Firm/Company
-	6399 Christie Ave STE 117
	Address
	Emeriville CA 94608
-	Emeriville CA 94608 City/State and Zip Code
	Saguin tero @ Live. com. E-mail address: (to be used for future annual report notification)
_	E-mail address: (to be used for future annual report notification)
For further information conce	rning this matter, please call:
0	0 1 2 70 112 (= 173
Sergio A	son at (786) 3436573 Area Code Daytime Telephone Number
Nume of Fer	And the Physical Control of th
Enclosed is a check for the fo	Howing amount:
₺ \$25.00 Filing Fee	□ \$30.00 Filing Fee & □ \$55.00 Filing Fee & □ \$60.00 Filing Fee.
	Certificate of Status Certified Copy Certificate of Status & (additional copy is enclosed) Certified Copy
	(additional copy is enclosed)
\$6.50 A.L.	Company Additional
Mailing Address: Registration Sect	Street Address: Registration Section
Division of Corp	orations Division of Corporations
P.O. Box 6327	The Centre of Tallahassee

2415 N. Monroe Street. Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

HERQUIN	LLC	夏尔
(<u>Name of the Limited</u> ()	Liability Company as it now appea V Florida Limited Liability Company)	ars on our records.)
The Articles of Organization for this Limited Lia Florida document number <u>47000014017</u>		5/27/2020 Frand assigned 5
This amendment is submitted to amend the follow	ving:	35 35 S
A. If amending name, enter the new name of t	he limited liability company h	<u>iere</u> :
The new name must be distinguishable and contain the work Enter new principal offices address, if applical (Principal office address MUST BE A STREET)	ble:	designation "L.L.C" or the abbreviation "L.L.C."
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B	<u> </u>	
B. If amending the registered agent and/or regagent and/or the new registered office address		records, <u>enter the name of the new registered</u>
Name of New Registered Agent:	Sergio A. Qu	intero
New Registered Office Address:	3118 Tyles	
	Kollumon	, Florida 33021

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>	Address	Type of Action
MGL	Manuel Hernandez	3118 Tyler street	□∧dd
		Hollywood FL 33021	Ekemove
			□Change
MAR	Seigio A. Quintero	3118 Tyler street	<u></u> €⁄∧dd
		Hollywood FL 33021	□Remove
		□Change	
			□Add
		□Remove	
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	···		□Add
			□Remove
			□Change

- -	
f an effect <u>Note:</u> H	e date, if other than the date of filing:
record s d is filed	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
Pated	Samuel
	A 0
	Seiglo A. Quinter D