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(Re	equestor's Name)	
(Ac	idress)	-
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PiCK-UP	WAIT	MAIL
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Certified Copies	_ Certificates	of Status
Special Instructions to Filing Officer:		
J. HORNE		
	NUV - 9 202	.1

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COVER LETTER

	tion Section of Corporations	•	
	: QUINA, LLC	ℓ ^p	N p
SUBJECT:	Name of Li	nited Liability Company	
The enclosed Artic	cles of Amendment and fee(s) are su	bmitted for filing.	
Please return all co	orrespondence concerning this matte	r to the following:	
	GUSTAVO ARGANAR	AΖ	
		Name of Person	
	REAL DREAMS USA		
		Firm/Company	
	850 NE 3RD STREET SU	JITE 107A	
		Address	
	DANIA BEACH		
		City/State and Zip Code	
	INFO@REALDREAMS-U		
		(to be used for future annual report notific	cation)
For further inform	ation concerning this matter, please of	call;	
GUSTAVO ARGA	ANARAZ	786 4201297	
7	Same of Person		Telephone Number
Enclosed is a checl	k for the following amount:		
■ \$25.00 Filing	Fee	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
<u>Mailing A</u> Registra	address: tion Section	Street Address: Registration Sect	ion

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

FILED

2021 NOV -1 AH 2: 32

TEOQUINA, LLC				SECRETARY OF TAREASTER OF
(Name of the Lin	ited Liability Compa (A Florida Limited	any as it now appears (Liability Company)	on our records.)	
The Articles of Organization for this Limited	Liability Company	were filed on 05/13	3/2021	and assigned
Florida document number L21000212795				
This amendment is submitted to amend the following	lowing:			
A. If amending name, enter the new name	of the limited liab	oility company here	:	
The new name must be distinguishable and contain the	words "Limited Liabi	lity Company," the desi	gnation "LLC" or the ab	breviation "L.L.C."
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		15751 SHERIDAN	N STREET SUITE 209)
		SOUTHWEST RANCHES, FL 33331		
				
Enter new mailing address, if applicable:		15751 SHERIDAN	N STREET SUITE 209)
(Mailing address MAY BE A POST OFFICE BOX)		SOUTHWEST RA	NCHES, FL 33331	
		 		
B. If amending the registered agent and/or agent and/or the new registered office addresses	registered office : ess here:	address on our reco	ords, <u>enter the name</u>	of the new registered
Name of New Registered Agent:	REAL DREAMS USA LLC			
New Registered Office Address:	850 NE 3RD S	TREET SUITE 107A		
		Enter Florida	street address	
	DANIA BEAC	Н	, Florida ³³⁰	
		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

Title	<u>Name</u>	Address	Type of Action
MGR	TIBER SERVICES, LLC	2434 HOLLYWOOD BLVD 2ND FL	□Add
		HOLLYWOOD, FL 33020	≣Remove
			□Change
MGR ACEVEDO DARIO	ACEVEDO DARIO	15751 SHERIDAN STREET SUITE 209	= Add
		SOUTHWEST RANCHES, FL 33331	□Remove
		□Change	
MGR DETTLER PRISCILA	DETTLER PRISCILA	15751 SHERIDAN STREET SUITE 209	≣Add
	SOUTHWEST RANCHES, FL 33331	□Remove	
		□Change	
			🗆 Add
			□Remove
			□ Change
		□Add	
		□Remove	
		□Change	
		🗀 Add	
		 	Remove
			🗆 Change

Т	he LLC has been assigned with the	e following EIN number to be registered 87-1308162
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F Effectiv	ve date, if other than the date o	of filing: (optional)
(If an effe	ctive date is listed, the date must be spec	cific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b
	If the date inserted in this block doe ont's effective date on the Departme	es not meet the applicable statutory filing requirements, this date will not be listed as the
docume	sit s effective date on the 17epartine	on of face a records.
If the record	I specifies a delayed effective date, b	but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
record is file	ed.	· ·
Dated _	OCTOBER 29	2021
		As I Lind
		1 To the second
	Signatui	ire of a member of mathorized representative of a member
	GUSTAVO ARGANARAZ	-

Typed or printed name of signee