9

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From:

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: (786)226-0501 Far Number

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

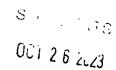
taaii Address: info@realdreams-usa.com

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN VARVAL LLC

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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

VARVAL LLC		
( <u>Name of the Limited Liability Comp</u> (A Florida Limited	ny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number <u>L21000300830</u>	were filed on 06/30/2021	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and contain the words "Limited Liab	lity Company," the designation "LLC" o	r the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
		,
		1
Enter new mailing address, if applicable:		; 
		₩
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:  Name of New Registered Agent:	address on our records, enter th	e name of the new registered
New Registered Office Address:		
	Enter Florida street address	
<del></del>	, Flori	da
	Сту	Zip Code
New Registered Agent's Signature, if changing Registered Agent		
I hereby accept the appointment as registered agent and agr provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as being filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my duties, and provided for in Chapter 605, F	I am familiar with and S. Or, if this document is
If Cha	nging Registered Agent, Signature of N	iew Registered Agent

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To: +18506176383

## If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	VALENTINO SUAREZ, ALBANO	Sarmiento 425 S	
		San Juan, Capital. Argentina 5402	□Remove
			= Change
			□Add
			□Remove
			□Change
<del></del>	<del></del>		□Add
			□Remove
			Change
<u>.</u>			
			□Remove
		<del></del>	Change
			DAdd
			□Remove
			Change

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To: +18506176383

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Effective date, if other the an effective date is listed, the Note: If the date inserted is locument's effective date of	i this block does not i	meet the applica	o date of filing or i ble statutory filin	(opt nore than 90 days after ng requirements, th	ional) r filing.) Pursuant to d is date will not be i	605.0207 listed as
record specifies a delayed d is filed.	effective date, but no	t an effective tir	ne, at 12:01 a.m.	on the earlier of: (	b) The 90th day a	fter the
OCTOBER 25TH		2023	<del></del> -			
Dated						
Dated		1. 1.	e dan Sa	e of a member		

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