121000367161

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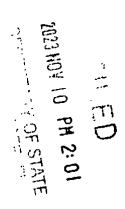
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COVER LETTER

TO:	Registration So Division of Cor		•	
	: MARMAR			
SUBJEC	CT:		nited Liability Company	
The encl	osed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please re	turn all correspo	ondence concerning this matter	to the following:	
		GUSTAVO ARGANARA	Z	
			Name of Person	
		REAL DREAMS USA		
			Firm/Company	
		850 NE 3RD STREET SU	TTE 107A	
			Address	
		DANIA BEACH / FLORI	DA / 33004	
			City/State and Zip Code	
		INFO@REALDREAMS-U	SA.COM to be used for future annual report no	
For furth	er information c	oncerning this matter, please c		ntrication)
GUSTA	VO ARGANAR	.AZ	786 4201297	
	Name o	f Person	at () Area Code Dayti	me Telephone Number
Enclosed	I is a check for th	nc 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 S		Street Address: Registration S	ection
	Division of C	Corporations	Division of Co	orporations
	P.O. Box 632 Tallahassee, 1		The Centre of 2415 N. Monr	Tallahassee oe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MARMARJU, LLC			
(Name of the Lim	ited Liability Compa (A Florida Limited	any as it now appears on our record Liability Company)	<u>s.</u> }
The Articles of Organization for this Limited I Florida document number L21000367161	Liability Company	were filed on 08/16/2021	and assigned
This amendment is submitted to amend the fol	lowing:		
A. If amending name, enter the new name of	of the limited liab	oility company here:	
The new name must be distinguishable and contain the	words "Limited Liabi	ility Company," the designation "LEC	" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		15751 SHERIDAN STREET S	SUITE 209
		SOUTHWEST RANCHES, FL 33331	
Enter new mailing address, if applicable:		15751 SHERIDAN STREET S	SUITE 209
(Mailing address MAY BE A POST OFFICE BOX)		SOUTHWEST RANCHES, FI	_ 33331
B. If amending the registered agent and/or agent and/or the new registered office address: Name of New Registered Agent: New Registered Office Address:	REAL DREAM		23 HOV 10 PM
	DANIA BEAC	, FI	UTTUA
	_	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, <u>enter the title, name, and address of each person_being ador removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	NALLAR, WALDO	15751 SHERIDAN STREET SUITE 209	≣ Add
		SOUTHWEST RANCHES, FL 33331	□Remove
			□ Change
MGR	TIRABOSCHI, BIBIANA	15751 SHERIDAN STREET SUITE 209	≅ Add
		SOUTHWEST RANCHES, FL 33331	□Remove
			Change
MGR	TIBER SERVICES, LLC	2434 HOLLYWOOD BLVD 2ND FL	□Add
		HOLLYWOOD, FL 33020	≣Remove
			□Change
			□Add
			□Remove
			□Change
			🗆 Add
		· · · · · · · · · · · · · · · · · · ·	□Remove
			□Change
	-		
			□Remove
			□Change

Note:	re date, if other than the date of filing:
the reco	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 ed.
Dated	NOVEMBER 9 2021
Date	· - // · · · ·

Filing Fee: \$25.00

Typed or printed name of signee