Florida Department of State

Division of Corporations Leading Filing Cover Sheet

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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : BLANCO ACCOUNTING I, INC.

Account Number : I20100000060 Phone : (305)828-1148 Fax Number : (305)828-1709

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

Email	Address:	
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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN

GALQUI & DUMU LLC

Certificate of Status 0

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Mag. 17. 2023 1:22PM AMTRAK SOMCETCDISF01

No. 9677 P. 2/5

Certified Copy	0
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Electronic Filing Menu

Corporate Filing Menu

Help

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

GALQUI & DUMU LLC		
(Name of the Limited Liability Compa (A Florida Limited	ny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company	were filed on 01/25/2023	and assigned
Florida document number £23000047706		
This amendment is submitted to amend the following:		
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 designation "LLC" or the	e abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
	· ·	
Enter new mailing address, if applicable:		
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(Muiling address MAY BE A POST OFFICE BOX)		
	. <u> </u>	
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	address on our records, <u>enter the n</u> e	ame of the new registered
agent and/or the new registered office address here.		202
Name of New Registered Agent:		
Name of New Registered Agent.		
New Registered Office Address:	Enter Florida streat address	
		-P.
	, Florida,	Zip Code 2.
New Registered Agent's Signature, if changing Registered Agent:	•	26
The state of the s	<u>.</u>	

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 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>	Name	Address	Type of Action
MGR	ANDRES G GALINDO QUIROGA	1080 BRICKELL AVE UNIT 2109	□Ahd
		MIAMI FL 33131	≣Remove
			□Change
AMBR	Gabriel Andres Galindo Quitoga	4546 SW 74 Ave Miami FL 33155	≅ Add
			□Remove
MGR	Carlos Andres Duenas Farfan	4546 SW 74 Ave Miami FL 33155	≅Add
			□Remove
			□ Change
MGR	Carlos Duenas	4546 SW 74 Ave Miami FL 33155	□Ađd
			≅Remove
			□Change
MGR	Jose Emilio Galindo Giraido	4546 SW 74 Ave Miami FL 33155	∃ Add
			□Remove
			[] Change
MGR	Jose Galindo	4546 SW 74 Ave Miami FL 33155	bbA□
			≅Remove
			□ Change

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Effective date, if other that if an effective date is listed, the da Note: If the date inserted in the document's effective date on	te must be specific his block does no	and cannot be prion of meet the appli	r to date of filing or meable statutory filin	(optio ore than 90 days after g requirements, this	filing.) Pursuant to 605.0207
e record specifies a delayed ef rd is filed.	fective date, but	not an effective	ime, at 12:01 a.m.	on the earlier of: (b)	The 90th day after the
05/17 Dated		2023			
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Typed or printed name of signee