\odot

(((H23000412869 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : REAL DREAMS USA LLC

Account Number : I20220000065

Phone Fax Number

: (736)420-1297 : (786)226-0501

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

Email Address: info@realdreams-usa.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN DON SANTOS IV LLC

| Certificate of Status | 0 |
|-----------------------|---------|
| Certified Copy | 0 |
| Page Count | 04 |
| Estimated Charge | \$25.00 |

M. SOLOMON

DEC - 5 2023

Electronic Filing Menu

Corporate Filing Menu

Help

 \odot

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(((H23000412869 3)))

(((H23000412869 3)))

| DON SANTOS IV LLC | | | |
|--|---|--|-----------------------------------|
| (<u>Name of the Limited Liability</u> (A Florida l | Company as it now appointed Liability Company | ears on our records.) | |
| The Articles of Organization for this Limited Liability Co Florida document number <u>L23000234513</u> | mpany were filed on (| 05/11/2023 | _ and assigned |
| This amendment is submitted to amend the following: | | | |
| A. If amending name, enter the new name of the limit | ed liability company | <u>here</u> : | |
| The new name must be distinguishable and contain the words "Limite | ed Liability Company," the | e designation "LLC" or the abbre | viation "L.L.C." |
| Enter new principal offices address, if applicable: | | <u> </u> | 2023 DEC |
| (Principal office address MUST BE A STREET ADDRE | <u></u> | | |
| | | | ŕ |
| | | | |
| Enter new mailing address, if applicable: | | | AHII:24 |
| (Mailing address MAY BE A POST OFFICE BOX) | | | 2175 |
| | | | |
| B. If amending the registered agent and/or registered agent and/or the new registered office address here: | office address on our | records, <u>enter the name o</u> | f the new registered |
| Name of New Registered Agent: | | | |
| New Registered Office Address: | | | |
| New Registered Office Address. | Enter Florida street address | | |
| | Florida | | |
| | Ciņ | | Zip Code |
| New Registered Agent's Signature, if changing Registered | Agent: | | |
| I hereby accept the appointment as registered agent as provisions of all statutes relative to the proper and con accept the obligations of my position as registered age being filed to merely reflect a change in the registered company has been notified in writing of this change. | nplete performance on the as provided for in | of my duties, and I am fam Chapter 605, F.S. Or, if t | iliar with and his document is |
| | If Changing Registered . | Agent, Signature of New Registe | ered Agent |

Э

(((H23000412869 3)))

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:

| MGR = . 1 AMBR = . <u>Title</u> | Manager Authorized Member <u>Name</u> | Address | Type of Action |
|---------------------------------------|---|-------------------------------------|----------------|
| MGR | ABRATTE, PABLO | 6067 HOLLYWOOD BLVD. SUITE 207 #174 | □Add |
| | | HOLLYWOOD, FL 33024 | ≅Reπюνe |
| | | | Change |
| MGR | ABRATTE, MARIA SOLEDAD | 6067 HOLLYWOOD BLVD, SUITE 207 #174 | □Add |
| | | HOLLYWOOD, FL 33024 | ≅Remove |
| | | | Change |
| MGR | MUELLER, ALFREDO SAUL | 6067 HOLLYWOOD BLVD, SUITE 207 #174 | ■Add |
| | | HOLLYWOOD, FL 33024 | 2023 |
| | | | Change T |
| | | | □Remove |
| | | <u></u> | Change |
| | | | □Add |
| | | | □Remove |
| | | | |

(((H23000412869 3)))

0

To: +18506176383

| | (((H23000412869 3))) |
|--|--|
| D. If amending any other information, enter change(s) here: (Attach additional sh | neets, if necessary:) |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | 2023 |
| | |
| | |
| | 11.0 |
| | - (1) |
| | - 35 TH O |
| | |
| | |
| | |
| E. Effective date, if other than the date of filing: (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than | (optional) |
| Note: If the date inserted in this block does not meet the applicable statutory filing required document's effective date on the Department of State's records. | rements, this date will not be listed as the |
| | |
| If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the ercord is filed. | earlier of: (b) The 90th day after the |
| Dated DECEMBER 4TH 2023 | |
| De Le 4 | |
| Signature of a member or authorized representative of a member of a member of authorized representative of a member of a membe | mber |
| PABLO ABRATTE | |
| Typed or printed name of signee | |