

# L23000332843

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## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN QUINJOA, LLC

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**AMENDED AND RESTATED ARTICLES OF ORGANIZATION  
OF  
QUINJOA, LLC**

Pursuant to F.S. 605.0202 of the Florida Revised Limited Liability Company Act, the undersigned, being the Manager of QUINJOA, LLC, a Florida Limited Liability Company (the "Company"), hereby adopts the following Amended and Restated Articles of Organization, which amend, restate, and supersede in their entirety the Articles of Organization of the Company that were filed with the Florida Department of State on July 14, 2023 and assigned Florida document number L23000332843.

**ARTICLE I – NAME**

The name of the limited liability company is QUINJOA, LLC, ("Company").

**ARTICLE II – ADDRESS**

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:  
999 Ponce de Leon Blvd., Ste. 720  
Coral Gables, FL 33134

Mailing Address:  
999 Ponce de Leon Blvd., Ste. 720  
Coral Gables, FL 33134

**ARTICLE III - REGISTERED AGENT,  
REGISTERED OFFICE, & REGISTERED AGENT'S SIGNATURE**

The name and the Florida street address of the registered agent are:

Legacy Counsel, PLLC  
999 Ponce de Leon Blvd., Ste 720  
Coral Gables, FL 33134

*Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 relating 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.*

  
\_\_\_\_\_  
Tax Counsel, PLLC  
By Andrea Aguilar, Authorized Representative

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#### ARTICLE IV - MANAGERS OR MEMBERS

The name and address of each person authorized to manage and control the Limited Liability Company:

Title:

"MGR" = Manager

"AMBR" = Authorized Member

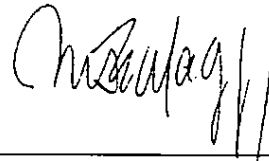
Name and Address:

MGR

Maria Fernanda Maggi Parodi  
999 Ponce de Leon Blvd., Ste 720  
Coral Gables, FL 33134

Suzanne Vanessa Topham  
999 Ponce de Leon Blvd., Ste 720  
Coral Gables, FL 33134

#### REQUIRED SIGNATURE:



\_\_\_\_\_  
Signature of a member or an authorized representative of a member.

This document is executed in accordance with section 605.0203(1)(b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Maria Fernanda Maggi Parodi

\_\_\_\_\_  
Typed or printed name of signer

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