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TILED 1024 MAY -6 PM 2:32 SECRETARY OF STATE

COVER LETTER

TO: Registration S Division of Co							
	A RCD, LLC						
SUBJECT: Name of Limited Liability Company							
The enclosed Articles of	f Amendment and fee(s) are sub	omitted for filing.					
Please return all corresp	ondence concerning this matter	to the following:					
	IGNACIO QUINTANA C	IGNACIO QUINTANA COBAS					
		Name of Person					
		Firm/Company					
	30 SW IST STREET						
		Address					
	MIAMI, FL 33130						
	dtilitzky@outlook.com	City/State and Zip Code	 -				
	E-mail address:	to be used for future annual repor	t notification)				
For further information	concerning this matter, please c	all:					
Daniela Tilitzky		305 546-679					
Name	of Person	at ()	aytime Telephone Number				
Enclosed is a check for t	the following amount:						
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)				
Mailing Addre Registration Division of O P.O. Box 632	Section Corporations		i Section Corporations				
T. U. 1		The Centre of Tallahassee					

Tallahassee, FL 32314

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2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ELCHONA RCD, LLC			
(<u>Name of the Limite</u> (d Liability Compa A Florida Limited	iny as it now appears on our Liability Company)	records.)
The Articles of Organization for this Limited Lia Florida document number L24000089689	ability Company	were filed on 02/20/2024	and assigned
This amendment is submitted to amend the follow	wing:		
A. If amending name, enter the new name of	the limited liab	ility company here:	
The new name must be distinguishable and contain the wo	rds "Limited Liabi	lity Company," the designation	"LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applica	ble:	30 SW 1ST STREET	
(Principal office address MUST BE A STREET		MIAMI FL 33130	SE 17.
			PR.
Enter new mailing address, if applicable:		SAME AS PRINCIPAL	ARY AHAS
(Mailing address MAY BE A POST OFFICE B	2 <u>0X)</u>		2 1 1 1
B. If amending the registered agent and/or reagent and/or the new registered office address	<u>here</u> :		enter the name of the new registered
Name of New Registered Agent:	IGNACIO QUI	NTANA COBAS	
New Registered Office Address:	30 SW IST ST		
	B41 A S 41	Enter Florida street	
	MIAMI	City	Florida 33130 Zin Code
New Registered Agent's Signature, if changing Re	gistered Agent:	·	
I hereby accept the appointment as registered provisions of all statutes relative to the proper accept the obligations of my position as regist being filed to merely reflect a change in the recompany has been notified in writing of this company	agent and agree and complete ered agent as p	ee to act in this capacity performance of my duti provided for in Chapter	es, and I am familiar with and 605, F.S. Or, if this document is

tr Changing Registered Agent, Signature of New Registered Agent

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	IGNACIO QUINTANA TOBAS	30 SW IST STREET	□ Add
		MIAMI FL 33130	■Remove
MGR	IGNACIO QUINTANA COBAS	30 SW IST STREET	≣ ∧dd
		MIAMI FL 33130	□ Remove
			Change
			□ Add
			□ Remove
			☐ Change
			□Add
			□Remove
			□Change
			□Add
			Remove
			□Add
			□Remove
			Change

it antending any other intori	nation, enter change(s) here:	(Attach additional sheets, if neces	
			-

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Effective date, if other than to (If an effective date is listed, the date is Note: If the date inserted in this document's effective date on the	block does not meet the applicable	date of filing or more than 90 days after file statutory filing requirements, this	nal) iling.) Pursuant to 605.0207 (3) date will not be listed as the
he record specifies a delayed effectord is filed.	tive date, but not an effective time	e, at 12:01 a.m. on the earlier of: (b)	The 90th day after the
Dated MAY 6TH	2024		
- · · · · · · · · · · · · · · · · · · ·	Signature of a number or authorize	red representative of a member	· · · · · · · · · · · · · · · · · · ·
IGNACIO QUINTAI			
	Typed or printed r	name of signee	

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Filing Fee: \$25.00