

Florida Department of State
 Division of Corporations
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L22000431832

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To: Division of Corporations
 Fax Number : (850)617-6383

From: Account Name : THE LAW OFFICES OF NICK SPRADLIN PLLC
 Account Number : 120070000020
 Phone : (813)435-3176
 Fax Number : (813)333-6358

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

Email Address: Louislovestrand@yahoo.com

RECEIVED
 2023 AUG 17 PM 12:01
 DEPARTMENT OF STATE
 DIVISION OF CORPORATIONS
 TALLAHASSEE, FLORIDA

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
 QUANTUMPLICITY, LLC**

Certificate of Status	0
Certified Copy	0
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2023 AUG 17 AM 11:26
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

APPROVED
 AND
 FILED

AUG 19 2023
 K. Brumbley

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

QUANTUMPLICITY, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 10/06/2022 and assigned Florida document number L22000431832.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

151 E. WASHINGTON ST.

(Principal office address MUST BE A STREET ADDRESS)

#519

ORLANDO FL 32801

Enter new mailing address, if applicable:

151 E. WASHINGTON ST.

(Mailing address MAY BE A POST OFFICE BOX)

#519

ORLANDO FL 32801

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

LOUIS LOVESTRAND

New Registered Office Address:

151 E. WASHINGTON ST. #519

Enter Florida street address

ORLANDO

City

Florida

32801

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

2022 AUG 17 AM 11:26
FILED
APPROVED AND
STATE OF FLORIDA
SECRETARY OF STATE

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>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	NICKOLAS SPRADLIN	18801 N. DALE MABRY HWY	<input type="checkbox"/> Add
		STE 119	<input checked="" type="checkbox"/> Remove
		LUTZ, FL 33548	<input type="checkbox"/> Change
AMBR	LOUIS LOVESTRAND	151 E. WASHINGTON ST.	<input checked="" type="checkbox"/> Add
		#519	<input type="checkbox"/> Remove
		ORLANDO FL 32801	<input type="checkbox"/> Change
AMBR	WILL LEE	151 E. WASHINGTON ST.	<input checked="" type="checkbox"/> Add
		#519	<input type="checkbox"/> Remove
		ORLANDO FL 32801	<input type="checkbox"/> Change
AMBR	ORION BEADLING	151 E. WASHINGTON ST.	<input checked="" type="checkbox"/> Add
		#519	<input type="checkbox"/> Remove
		ORLANDO FL 32801	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

