## N02000005105

(Requ	uestor's Name)	
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R WHITE

January 11, 2021

Florida Department of State Amendment Section Divisions of Corporations PO Box 6327 Tallahassee, FL 32314

Dear Sir or Madam,

Enclosed is a completed form for filing Articles of Amendment to amend the articles of incorporation of Quota International of Plantation, Inc., a Florida Not-for-Profit Corporation.

In the past we were under the umbrella of Quota International, Inc., which was dissolved on October 1, 2020. This necessitates a change of name, and the members voted to adopt Quota of South Florida, Inc. as our name going forward. I also updated the information to reflect the current club officers and the registered agent. No other changes are requested.

Should you have any questions, please contact me by phone or email.

Thank you,

Lillian Llamas, Treasurer Quota of South Florida, Inc.

9360 SW 185 Street Cutler Bay, FL 33157

Phone: (786) 897-0415

Email: cookiellamas@gmail.com

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

Quota Interna NAME OF CORPORATION:	itional of Plantation, Inc.		
N02000005105 DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee a	are submitted for filing.		
Please return all correspondence concerning th	is matter to the following:	;	×
Lillian Llamas			
	(Name of Contact	Person)	
Quota of South Florida, Inc.			
	(Firm/ Compa	ny)	
9360 SW 185th Street			
	(Address)	<del></del>	
Cutler Bay, FL 33157			
	(City/ State and Z	ip Code)	
cookiellamas@gmail.com			
E-mail address: (to	be used for future annual	report notificatio	n)
For further information concerning this matter	, please call:		
Lillian Llamas		786 at	897-0415
(Name of Contact			(Daytime Telephone Number)
Enclosed is a check for the following amount r	made payable to the Florid	la Department of	State:
□ \$35 Filing Fee ■\$43.75 Filing Fee Certificate of \$	Fee & \$\sum \\$43.75 \text{ Filing Fe} Status Certified Copy (Additional copenclosed)	Certif y is Certif	0 Filing Fee icate of Status ied Copy tional Copy is osed)
Mailing Address Amendment Section		Street Address Amendment Sect	ion
Division of Corporations		Division of Corpo	

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

## Articles of Amendment to Articles of Incorporation of

	of	
Quota International of Plantation, Inc.		24 1 14 7 H: 51
(Name of Corporation as currently filed with the F	lorida Dept. of State)	
N02000005105		
(Documen	it Number of Corporation (if k	nown)
Pursuant to the provisions of section 617.1006, Florida amendment(s) to its Articles of Incorporation:	a Statutes, this <i>Florida Not Fe</i>	or Profit Corporation adopts the following
A. If amending name, enter the new name of the co	orporation:	
Quota of South Florida, Inc.		The new
name must be distinguishable and contain the word "company" or "Co." may not be used in the name.	corporation" or "incorporate	
B. Enter new principal office address, if applicable	Elinor Adler, Preside	ent
(Principal office address MUST BE A STREET ADDI		uc
	Pembroke Pines, FL	33027
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	<b>)X</b> )	
D. If amending the registered agent and/or registered new registered agent and/or the new registered		, enter the name of the
<u>Name of New Registered Agent</u> :	illian Llamas, Treasurer	
93	360 SW 185th Street	
New Registered Office Address:	(F	lorida street address)
Ci	utler Bay	Florida 33157
_	(City)	(Zip Code)
New Registered Agent's Signature, if changing Reg I hereby accept the appointment as registered agent.		t the obligations of the position.
	Gellian	Comas
	Signature of New Regist	tered Agent, if changing

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change X Remove X Add	PT John Do V Mike Jo SV Sally S	<u>oneş</u>	
Type of Action (Check One)	Title	Name	Address
1) Change Add	PD	Burnside, Karen	1811 East Oak Knoll Ciecle Davie, FL 33324
x Remove  2) x Change Add	PD	Adler, Elinor	790 SW 164 Avenue Pembroke Pines, FL 33027
Remove  3 ) Change Add × Remove	SD	Reyes, Elaine	12660 Magnolia Court Coral Springs, FL 33071
4) Change × Add	<u>SD</u>	Naidus, Claudia	7004 NW 79 Street Tamarac, FL 33321
Remove  5) Change Add  Remove			
6) Change Add			
E. If amending or adding (attach additional sheet)  ARTICLES OF INCORP	ets, if necessary).	icles, enter change(s) here: (Be specific)	
ARTICLE I NAME  The name of the corporat	ion shall be Quota	of South Florida, Inc.	

The principal place of business and mailing address of this cor	poration shall be:
Quota of South Florida, Inc.	· · · · · · · · · · · · · · · · · · ·
c/o Elinor Adler	
790 SW164 Avenue	· · · · · · · · · · · · · · · · · · ·
Pembroke Pines, FL 33027	
<del></del>	
	·
The date of each amendment(s) adoption: 11/12/2020 date this document was signed.	, if other than the
Effective date if applicable:	
(no more than 90 da	ys after amendment file date)
<u>Note:</u> If the date inserted in this block does not meet the appli-document's effective date on the Department of State's records	cable statutory filing requirements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	

The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s)

was/were sufficient for approval.

⊡	There are no mem adopted by the bo	bers or members entitled to vote on the amendment(s). The amendment(s ard of directors.
	Dated	01/11/2021
	Signature	(By the chairman or vice chairman of the board, president or other officer have not been selected, by an incorporator – if in the hands of a receiver, other court appointed fiduciary by that fiduciary)
		Lillian Llamas
		(Typed or printed name of person signing)
		Treasurer, Quota of South Florida, Inc.
		(Title of person signing)

## 2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000005105

Entity Name: QUOTA INTERNATIONAL OF PLANTATION, INC.

**Current Principal Place of Business:** 

1811 E OAK KNOLL CIRCLE

**DAVIE, FL 33324** 

**Current Mailing Address:** 

1811 E OAK KNOLL CIRCLE

DAVIE, FL 33324 US

FEI Number: 52-1973460 Certificate of 5

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Name and Address of Current Registered Agent:

BURNSIDE, KAREN 1811 E OAK KNOLL CIRCLE DAVIE, FL 33324 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in

SIGNATURE: KAREN BURNSIDE

Electronic Signature of Registered Agent

Officer/Director Detail:

Title PD Title VD

BURNSIDE, KAREN Name Name ADLER, ELINOR 1811 E OAK KNOLL CIRCLE Address Address 790 SW 164 AVEN

City-State-Zip: PEMBROKE PINE City-State-Zip: DAVIE FL 33324

Title Titte TD SD

Name ELAINE, REYES Name LLAMAS, LILLIAN Address 12660 MAGNOLIA Address 9360 SW 185 STREET

City-State-Zip: CORAL SPRINGS City-State-Zip: CUTLER BAY FL 33157

ARTICLES OF INCORPORATION	
In Compliance with Chapter 617, F.S., (Not for Profit)	<b>ರ</b> . 0
	02 . SEC
The name of the O	JUL F
The name of the Corporation shall be: Quota International of Plantation, Inc.	FILE JL -3 F JR TARY
duota internacional di Plantation, Inc.	-3 ASS
MENICEPH PRINCIPAL OFFICE	ED PM 4:11 Y OF STATI
The principal place of business and mailing address of this corporation shall be:	
Quota International of Plantation, Inc.	÷
c/o Claudia Naidus	LORIDA
7004 NW 79 Street	Þ
Tamarac, FL 33321	
ADMICI E IV. DIDDOG	
The purpose for a bid all all all all all all all all all al	
The purpose for which the corporation is organized is:	
To seek individuals of diverse occupations committed to sharing their time, talent, meet Quota International's goals for service, and more posticularly	and resources to
meet Quota International's goals for service, and more particularly:	
1) to serve country and community, 2) to promote high ethical standards, 3) dignity of all useful occupation. 4) to develop mod fellowship.	to emphasize the
of righteousness, justice, international understanding and irrendship, (	) to advance ideals
charitable programs.	develop and foster
ADDIOLE DI CAMPANIA	
ARTICLE IV MANNER OF ELECTION	
The manner in which the directors are elected or appointed:	
A nominating committee of three members, named at the business meeting in Februs a slate of officers/directors to present to the club at the business meeting in February	uarv. shall prepare
a slate of officers/directors to present to the club at the business meeting in February nominations may be made from the floor of the April 1.	Further
ballot, except if there is but one condidate for each afficial integring in April. The	e voting <u>sh</u> all be by
officers shall be elected viva voce (voice vote). Installation of officers shall be no lat	pensed with and
ADMICT E 1/ Throng ( = 0	er man April 30 <sup>th</sup> .
ARTICLE V INITIAL DIRECTORS/OFFICERS	
The name(s), address(es) and title(s):	
Donna Beutner, 2000 NW 106 Avenue, Pembroke Pines, FL 33026	D
Ciacula italius, IVO4 NW /3 Street Tamarac El 99991	D
Margaret Overby, 16635 SW 148 Avenue, Miami, FL 33187  Darlene Vlazny, 680 SW 75 Terrace, Plantation, FL 33317  D	
1240179 YESTOP 11217 NOW 19 Comm. 25 1 0	
Carol Level, 1000 IND 49 Street Dakland Dark Dt 2000s	PD
ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS	
The Mand and Florida Street address of the registered exception.	
Claudia Naidus, 7004 NW 79 Street, Tamarac, FL 33321	
ANTICLE VII INCURPORATOR	
The name and address of the incorporator is:	
The name and address of the incorporator is:  Donna Beutner, 2000 NW 106 Avenue, Pembroke Pines, FL 33026	
The name and address of the incorporator is:  Donna Beutner, 2000 NW 106 Avenue, Pembroke Pines, FL 33026  Having been named as registered agent to growth agents and address of the incorporator is:	r <del>ockszákkkázak zakk</del> designatud
The name and address of the incorporator is:  Donna Beutner, 2000 NW 106 Avenue, Pembroke Pines, FL 33026  Having been named as registered agent to growth agents and address of the incorporator is:	<del>restannakkannakk</del> designated pacity.
The name and address of the incorporator is:  Donna Beutner, 2000 NW 106 Avenue, Pembroke Pines, FL 83026  Having been named as registered agent to accept service of process for the above stated corporation at the place In this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this cay	<del>inakasaskas</del> designatud pacity.
The name and address of the incorporator is:  Donna Beutner, 2000 NW 106 Avenue, Pembroke Pines, FL 33026  Having been named as registered agent to accept service of process for the above stated corporation at the place. In this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this cap.  Simulation.	oaaity.
The name and address of the incorporator is:  Donna Beutner, 2000 NW 106 Avenue, Pembroke Pines, FL 33026  Having been named as registered agent to accept service of process for the above stated corporation at the place. In this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this cap.  Simulation.	oaaity.
The name and address of the incorporator is:  Donna Beutner, 2000 NW 106 Avenue, Pembroke Pines, FL 33026  Having been named as registered agent to accept service of process for the above stated corporation at the place. In this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this cap.  Signature/Registered Agent, Claudia Neider.	oaaity.