## 1 / Faco 88909

	(Requestor's Name)			
	(Address)			
	(Address)			
	(City/State/Zip/Phone #)			
PICK-UF	P WAIT	MAIL		
	(Business Entity Name)			
(Document Number)				
Certified Copies	Certificates of 9	Status		
Special Instructions	s to Filing Officer:			
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W17-31118

M. MOON APR 1 9 2017



## FLORIDA DEPARTMENT OF STATE Division of Corporations

April 10, 2017

QASIM ABIDI 930 LORMANN CIR LONGWOOD, FL 32750

SUBJECT: QUE INVESTMENT LLC.

Ref. Number: W17000031118

We have received your document for QUE INVESTMENT LLC. and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must be signed by a member or an authorized representative of a member.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Matthew T Moon Regulatory Specialist II

Letter Number: 117A00006904

## **COVER LETTER**

	ew Filing Section ivision of Corporations		
SUBJECT	Que Investmemt LLC.		
SUBJECT		me of Limited Liability Company	
The enclos	ed Articles of Organization and	fee(s) are submitted for filing.	
Please retu	rn all correspondence concernit	ng this matter to the following:	`
	Qasim Abidi		
		Name of Person	
	Que Investment LLC.		
		Firm/Company	<del></del> , .
	930 Lormann Cir		
	<del></del>	Address	
	longwood, FL 32750		
	abidi66@gmail.com	City/State and Zip Code	17 MPN 19
		o be used for future annual report notification)	
For further i	nformation concerning this mat	ter, please call:	19
	Qasim Abidi	732 4708160	2 =
	Name of Person	Area Code Daytime Telephone Number	
Enclosed i	s a check for the following amo	unt:	
\$125.00 F	iling Fee \$130.00 Filing Certificate of	Fee & \$155.00 Filing Fee & \$160.00 Filing Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy	Status &
	Mailing Address New Filing Section	Street Address New Filing Section	

New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Que Investn	nent LLC.			
	Aust contain the words "Limited	Liability Compar	y, "L.L.C.," or "LLC.")	
ARTICLE II - Address and the mailing address and	s: d street address of the principal	office of the Limit	ed Liability Company is:	
	Principal Office Address:		Mailing Address:	
930 Lormann Cir, Longwood, FL, 32750		93	930 Lormann Cir, longwood, FL, 32750	
The Limited Liability ( nother business entity	with an active Florida registration	n Registered Agen on.)	gent's Signature: t. You must designate an individua	alor 1
	Qasim Abidi	Name	· · · · · · · · · · · · · · · · · · ·	<b>3</b>
	222.1			# <u>.</u>
	930 Lormann Cir Florida street addres	se (P.O. Box NOT	NOT acceptable)	
			•	
	longwood	FL -	32750	
	City	State	Zip	
ace designated in this c rther agree to comply w	ertificate, I hereby accept the app with the provisions of all statutes i	pointment as regist relating to the prop	the above stated limited liability cor ered agent and agree to act in this er and complete performance of m nt as provided for in Chapter 605, I	capacity. I y duties, and I

(CONTINUED)

<u>Title:</u> "AMBR" = Aı	uthorized Member	Name and Address:	
"MGR" = Mar	nager	Qasim Abidi	
MGR	<del></del>	930 Lormann Cir Longwood, FL, 32750.	
			25.017
		7 H	
<del></del>			
			•
		La	
<del></del>	<del></del>	——————————————————————————————————————	-
			: 1
(Lice attachme	nt if necessary)		
(If an effective date is li the date of filing.) Note: If the date inserte	sted, the date must be specific a	ng: 04/04/2017 (OPTIONAL)  and cannot be more than five business days prior to or 90 d  e applicable statutory filing requirements, this date will not be  e's records.	•
ARTICLE VI: Other pro	ovisions, if any.		
DECAMPED (			
RECOURED	SIGNATURE:		
	This document is executed in a I am aware that any false inform	or an authorized representative of a member. accordance with section 605.0203 (1) (b), Florida Statutes. nation submitted in a document to the Department of State y as provided for in s.817.155, F.S.	
	This document is executed in a I am aware that any false inforn constitutes a third degree felony  Qasim Abidi	accordance with section 605.0203 (1) (b), Florida Statutes.  nation submitted in a document to the Department of State	

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

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)