

L046000043258

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

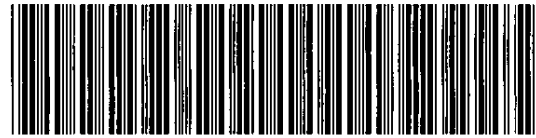
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

L04-43258

Office Use Only



600130256266

06/30/08--01050--003 **35.00

FILED

2008 JUL 22 P 4:58
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

A. LUNT

JUL 23 2008

EXAMINER



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 7, 2008

CHRISTIAN STERLING
3300 N 191ST APT. 1408
AVENTURA, FL 33180

SUBJECT: QUOTE INVESTMENT GROUP LLC
Ref. Number: L04000043258

FILED
2008 JUL 22 P 4:58
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

We have received your document for QUOTE INVESTMENT GROUP LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

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) 245-6094.

Agnes Lunt
Regulatory Specialist II

Letter Number: 908A00040017

COVER LETTER

TO: **Registration Section
Division of Corporations**

SUBJECT: Quote Investment Group LLC
(Name of Limited Liability Company)

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Omar Otero
(Name of Person)
Quote Investment Group LLC
(Firm/Company)
19727 NW 84 Place
(Address)
Miami, FL 33015
(City/State and Zip Code)

For further information concerning this matter, please call:

Omar Otero at 305, 216-4848
(Name of Person) (Area Code & Daytime Telephone Number)

2009 JUL 22 P 4: 58
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

Enclosed is a check for the following amount:

- ☒ \$25.00 Filing Fee
☐ \$30.00 Filing Fee & Certificate of Status
☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)
☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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

Quote Investment Group 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 06/08/2004 and assigned Florida document number L04000043258.

This amendment is submitted to amend the following:

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

Quote Management Services

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

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

FILED
2008 JUL 22 PM 4:58
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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:

New Registered Office Address:

(Enter Florida street address)

, Florida

(City)

(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 608, 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)

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

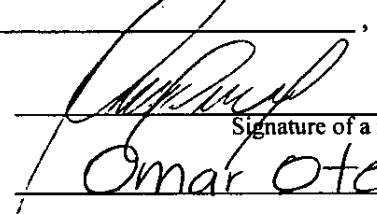
MGR = Manager
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

FILED
 JUL 22 P 4:58
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

Dated _____


 CEO 07/14/08
 Signature of a member or authorized representative of a member
 Omar Otero
 Typed or printed name of signee