1040000001

(Requestor's Name)					
(Address)					
(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:					

Office Use Only



600137648776

11/10/08--01023--023 **25.00

08 NOV 10 PM 5: 23

S. HAWKES

NUV 1 2 2008

EXAMINER

COVER LETTER

TO: Registration Se Division of Cor			
SUBJECT: QUANTI	PIED PURCHASING RESC	OURCES, LLC nited Liability Company)	
	(
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspondent	ondence concerning this matter	to the following:	
	CHRISTOPHER SWART		
		(Name of Person)	
	.est	<u> </u>	
		(Firm/Company)	
	1515 INTERNATIONA	L PARKWAY, STE. 2013	
		(Address)	
	HEATHROW, FL 3274		
		(City/State and Zip Code)	
For further information c	oncerning this matter, please c	all:	
CHRISTOPHER SWARTZ		at (407) 333-89 (Area Code & Daytime T	98
(Name o	of Person)	(Area Code & Daytime T	elephone Number)
Enclosed is a check for the	e following amount:		·
\$25.00 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

QUANTIFIED PURCHASING RESOURCES, 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 Li	ability Company v	vere filed on <u>08/20/20</u>	004	andussigned			
Florida document number	·			2			
This amendment is submitted to amend the follo	wing:	·		多 6			
A. If amending name, enter the new name of	the limited liabil	ty company here:		N 5: 2			
The new name must be distinguishable and end with "L.L.C."	h the words "Limite	d Liability Company," the	designation	"LLC" or the abbreviatio			
Enter new principal offices address, if applica	ıble:						
(Principal office address MUST BE A STREET ADDRESS)							
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE I	<u>80X)</u>	1515 INTERNATION. HEATHROW, FL 3274		AY. STB. 2013			
B. If amending the registered agent and/or registered agent and/or the new registered of		e address on our reco	rds, <u>enter</u>	the name of the nev			
Name of New Registered Agent:	CHRISTOPHER	SWARTZ	····-				
New Registered Office Address: 1515 INTERNATIONAL PARKWAY, STE. 2013							
		(Enter Flor	ida street a	ddress)			
	HEATHROW		, Florida _	32746			
		(City)		(Zip Code)			
New Registered Agent's Signature, if changing R	egistered 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.

(II 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>Address</u> Type of Action **Title** <u>Name</u> MGRM JOHN KINTZLER 25527 HAWKS RUN LANE □ Add SORRENTO, FL 32776 Remove 1515 INTERNATIONAL PICKER Add MGRM CHRISTOPHER SWARTZ Remove Add Remove ☐ Add Remove نن DbA 🔲 Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated NOVEMBER 2008 Signature of a member or authorized representative of a member CHRISTOPHER SWARTZ Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00