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(Requestor's Name)

(Address)

(Address)

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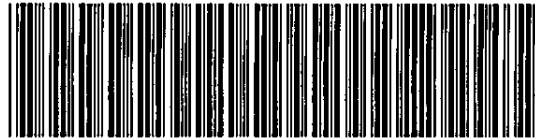
(Business Entity Name)

(Document Number)

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**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Kiosk Payment Systems, 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:

Michael P. Williams  
(Name of Person)

Kiosk Payment Systems, LLC  
(Firm/Company)

13342 SW 40 ST  
(Address)

DAVIE, FL 33330  
(City/State and Zip Code)

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For further information concerning this matter, please call:

Michael Williams at (954) 665-3322  
(Name of Person) (Area Code & Daytime Telephone Number)

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

Kiosk Payment Systems, LLC  
(Present Name)  
(A Florida Limited Liability Company)

FIRST: The Articles of Organization were filed on 1-10-07 and assigned  
document number L05000011946.

SECOND: This amendment is submitted to amend the following:

change company name to:  
Best Quality & Service Company, LLC

Dated 1-15, 2007.



Signature of a member or authorized representative of a member

Michael P. Williams

Typed or printed name of signee

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TALLAHASSEE FLORIDA