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(Re	questor's Name)					
(Ad	dress)					
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PICK-UP	☐ WAIT	MAIL				
(Bu	siness Entity Nar	me)				
(Do	cument Number)	<u> </u>				
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2001 OCT 10 P 2: 32 SECRETARY OF STATE

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COVER LETTER

TO: Registration Section Division of Corporations							
SUBJECT: QSR ACCOUNTING SOLUTIONS, 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:							
ROY D VANCE							
(Name of Person)							
QSR TAX & ACCOUNTING SOLUTIONS, LLC							
(Firm/Company)							
12271 LEXINGTON PARK DRIVE # 303							
(Address)							
TAMPA, FL 33626							
TAMPA, FL 33626 (City/State and Zip Code) (City/State and Zip Code)							
TAMPA, FL 33626 (City/State and Zip Code) For further information concerning this matter, please call:							
ROY D VANCE at (813) 746-8320							
(Name of Person) (Area Code & Daytime Telephone Number)							
Enclosed is a check for the following amount:							

S55.00 Filing Fee & Certified Copy

(additional copy is enclosed)

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

\$25.00 Filing Fee

\$30.00 Filing Fee & Certificate of Status

STREET/COURIER ADDRESS:

\$60.00 Filing Fee, Certificate of Status &

(additional copy is enclosed)

Certified Copy

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

QSR ACCOUNTING SOLUTIONS, LLC (Present Name) (A Florida Limited Liability Company)

FIRST:	The Article	es of Organ number <u>LC</u>	zation we 700008	re filed or 16859	AUG	UST	23, 20	07	and assi	gned	*	, ,
SECOND:												
				<u>.</u>			<u> </u>					_
	NAME:	QSR T	AX_& /	4ČCOI	UTNL	1G S	SOLU.	TIONS	S, LLC		<u> 51</u>	
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Dated				.,			<u></u> -					*
			7/									
		KK	/>2	<i>u</i>				•				
	Signature of a member or authorized representative of a member											
	RO'	Y D VAI	NCE			-		T T				

Filing Fee: \$25.00

Typed or printed name of signee