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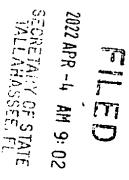
(Re	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
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Office Use Only



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A. BUTLER APR 1 8 2022

COVER LETTER

TO:

Registration Section

Q & Q Con	tractors, LLC				
SUBJECT:		ited Liability Company	<u>.</u>		
The enclosed Articles of	Amendment and fec(s) are sub	mitted for filing.			
Please return all correspo	ndence concerning this matter	to the following:			
	Fernando Quintero				
		Name of Person			
	Q & Q Contractors, LLC				
	<u></u> -	Firm/Company			
	543 Racquet Club Rd UNIT 35				
		Address			
	Weston, FL 33326				
		City/State and Zip Code			
	fquintero@qandqcontractor	s.com to be used for future annual report no	ritication)		
For further information c	oncerning this matter, please of		incarn,		
Isabela Quintero		954 3005346			
	f Person	at (me Telephone Number		
Name o	i resam	Area Code Trayur	ne receptante rantoci		
Enclosed is a check for th	ne 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 tadditional copy is enclosed:		
Mailing Addres	_	Street Address:			
Registration S			Registration Section		
Division of C P.O. Box 632		Division of Corporations The Centre of Tallahassee			
r.O. D0x 032	. 1		oe Street. Suite 810		

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



Q and Q Contractors, LLC

2022 APR -4 AM 9: 02

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) SECRETA: The Articles of Organization for this Limited Liability Company were filed on $\frac{11/30/2017}{2}$ Florida document number L09000012452 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: Q & Q Aluminum Solutions, LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "L.I.C." or the abbreviation "L.I.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) 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 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 605, 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 Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
			
			Remove
		 	□Change
			□Add
			Remove
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Tective date, if other than the date an effective date is listed, the date must be sote: If the date inserted in this block occument's effective date on the Depart	specific and cannot be prior to date of fili does not meet the applicable statutor	(optional) ng or more than 90 days after filing.) Pursuar y filing requirements, this date will not	nt to 605,0207 (be listed as t
record specifies a delayed effective dat is filed.	e, but not an effective time, at 12:01	a.m. on the earlier of: (b) The 90th d	lay after the
03/28 med	2022	8	
	ature of a member or authorized represe	ntative of a member	

Filing Fee: \$25.00