# 10900098610

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	······
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nar	ne)
(Do	ocument Number)	<del></del>
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



300312687553

05/08/18--01023--006 \*\*25.00

RECEIVED MAY 0 7 2018

SECRETARY OF STATE DIVISION OF CORPORATIONS

N COOPER MAY 1 0 2018

### **COVER LETTER**

Divis	ion of Corpo	orations		
SUBJECT:	QC 301 LLC			
SUBJECT: _		Name of Limi	ted Liability Company	· · · · · · · · · · · · · · · · · · ·
The enclosed	Articles of Ar	mendment and fee(s) are sub-	mitted for filing.	
Please return a	all correspond	lence concerning this matter	to the following:	
		CARRIE CHRISTINO		
		<del></del>	Name of Person	
		SOHO CAPITAL LLC		
			Firm/Company	<del></del>
		701 S HOWARD AVE ST	E 106-322	
			Address	
		TAMPA, FL 33606		
			City/State and Zip Code	
		CARRIE@SOHO-CAPITA		
		E-mail address: (1	o be used for future annual repor	t notification)
For further inf	formation con	cerning this matter, please ca	dli:	
CHARLES B	RUCK		813 335-92 at ()	
	Name of F	Person	Area Code D	aytime Telephone Number
Enclosed is a	check for the	following amount:		
■ \$25.00 Fil	ling 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:** 

TO:

Registration Section

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

QC 301 LLC		
( <u>Name of the Limited Liabili</u> (A Florid	ity Company as it now appears on our records.) a Limited Liability Company)	······································
The Articles of Organization for this Limited Liability C	Company were filed on 10-12-09	and assigned
Florida document number L09000098610	<del></del> ·	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lim	ited liability company here:	
The new name must be distinguishable and contain the words "Lin	nited Liability Company," the designation "LLC" o	
Enter new principal offices address, if applicable:		DIVISE S
(Principal office address MUST BE A STREET ADD)	RESS)	
		1 FAR
V		RPOR SI
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		<u> </u>
B. If amending the registered agent and/or registered agent and/or the new registered office add		enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Flori	
	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 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>	<u>Name</u>	Address	Type of Action
MGR	CHARLES BRUCK	701 S HOWARD AVE	
		STE 106-322	Remove
		TAMPA, FL 33606	Change
	<del> </del>		Add
			□ Remove
			☐ Change
			Add
			□ Remove
		<del></del>	Change
			☐ Add
			☐ Remove
			□ Change
<del></del>			□ Add
			□ Remove
			□ Change
<del></del>			Add
			☐ Remove
			☐ Change

•			
	<del> </del>		
			<del></del>
			DIVIS
		· · · · · · · · · · · · · · · · · · ·	F COR
			PORAL
	· · · · · · · · · · · · · · · · · · ·		
<del> </del>			
<del></del>			
Effective date, if other than t	ne date of filing:	(option	nal)
Note: If the date inserted in this document's effective date on the	block does not meet the applicable Department of State's records.	te of filing or more than 90 days after fi statutory filing requirements, this o	ling.) Pursuant to 605.0207 late will not be listed as
he record specifies a delay The 90th day after the r	ed effective date, but not an ecord is filed.	effective time, at 12:01 a.	m. on the earlier of
MAY 3 Dated	2018		
	, 2018	buch	
<u></u>	•	representative of a member	

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00