Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : HOMMERDING ADVISORS LLC

Account Number : I20220000171 Phone : (954)532-3842 Fax Number : (954)532-3847

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN **QUALITTAS USA LLC**

Certificate of Status	0
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Page Count	05
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Corporate Filing Menu

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COVER LETTER?

TO: Registration Section

Tallahassee, FL 32314

Division of Cor	porations						
	AS USA ELC						
SUBJECT:							
The enclosed Articles of .	Amendment and fee(s) are sub-	mitted for filing.					
Please return all correspo	ndence concerning this matter	to the following:					
	ALVIN HOMMERDING						
		Name of Person					
	EAGLE TAX						
		Firm/Company		_			
	5493 WILES RD SUITE I	05					
		Address	.,,	_	~)		
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	<u> </u>	City/State and Zip Code			A	******	
	corporate@eagle-tax.com	to be used for future annual report notific				1	
For further information c	e-man address: (oncerning this matter, please of		raciony	349 116	84 :11 H8	1	
ALVIN A HOMMERDI		954 532-3842			∓ £		
	f Person	at ()	Telephone Numb	رن رن			
Name o	rerson	Area Code Daytine	relephone . value				
Enclosed is a check for the	ne following amount:						
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55,00 Filing Fee & Certified Copy (additional copy is enclosed)	Certific Certific	60.00 Filing Fee, Certificate of Status & Certified Copy additional copy is enclosed)			
Mailing Address		<u>Street Address:</u> Registration Sec	tion				
Registration S Division of C		Division of Corp					
P.O. Box 632	•	The Centre of Ta	illahassee				

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

OUALITTAS USA 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 Liability Company were filed on $\frac{07/20/2010}{1}$ Florida document number L10000076326 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." 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 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
AMBR	DANIELA DE ALMEIDA FEO	8605 NW 35TH COURT J	
		CORAL SPRINGS, FL 33065	_
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	7		Signature	of a membe	r or authori:	ved representat	ive of a memb	er		
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Filing Fee: \$25.00