#112000032322

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SECRETARY OF STATE

K.SALY EXAMINER JUL 3 0 2013

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Federal Quote, 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:

Joe Bretti
Name of Person
Federal Quot,LLC
Firm/Company
4770 Bucida Rd
Address
Boynton, FI 33436
City/State and Zip Code
joe.bretti@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Joe Bretti at (561) 305-1400

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

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13 JUL 29 PM 9: 44

SECRETARY OF STATE
FALLAHASSEE, FLORIDA:

Federal Quote.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 Lie Florida document number L12000032322	ability Company	were filed on 03/07/201	12 and assigned	
This amendment is submitted to amend the follo	wing:			
A. If amending name, enter the new name of	the limited liab	ility company here:		
The new name must be distinguishable and end with "L.L.C."	the words "Limi	ted Liability Company," the d	esignation "LLC" or the abbreviation	
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		4770 Bucida Rd		
		Boynton, FI 33436		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		4770 Bucida Rd Boynton, FL 33436		
B. If amending the registered agent and/or the new registered of			rds, enter the name of the new	
Name of New Registered Agent:	Joe Bretti			
New Registered Office Address:	4770 Buci	da Rd		
	Enter Florida street address			
	Boynton		, Florida <u>33436</u>	
		City	Zip Code	
New Registered Agent's Signature, if changing I	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 608, 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 Chapping Registered Agent, Signature of New Registered Agent

If amending the Managers or Managing Members on our records, <u>enter the title</u>, <u>name</u>, <u>and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager MGRM = Managing Member <u>Title</u> <u>Name</u> **Address** Type of Action 4770 Bucida Joe Bretti MGRM Boynton,FL33436 **Scott Ballin** 5301 N.Federal Hwy suite 180 MGR Boca Raton, FL 33487 Remove Remove

•	mending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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Dated	July 12 2013
_	Davielle Butty
	Signature of a member or authorized representative of a member
	Danielle Bretti
	Typed or printed name of signee

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Filing Fee: \$25.00