## 112000095807

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(Address)	
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## COVER LETTER

* ·	COVER LETTER &	,	
TO: Registration Sect Division of Corpo			
SUBJECT: QUE I	DICE LLC		
Subject.	Name of Limited Liability Company		
The enclosed Articles of A	mendment and fee(s) are submitted for filing.		
Please return all correspond	lence concerning this matter to the following:		
	Benjamin Schiff		
	Name of Person		
	Benjamin Schiff Attorney At Law		
	Firm/Company		
	1901 Harrison St		
	Address	2014	
	Hollywood, FL 33020		-
	City/State and Zip Code	11.	
	westonusa@gmail.com		τι Τ
	E-mail address: (to be used for future annual report notification)		 U
For further information con	cerning this matter, please call:	<b>三</b> 亞(	J.
Ben Schiff	<sub>at</sub> 954 <sub>.</sub> 921-6431		
Name of P	erson Area Code Daytime Telephone Number		
Enclosed is a check for the	following amount:		
■ \$25.00 Filing Fee	□ \$30.00 Filing Fee & □ \$55.00 Filing Fee & □ \$60.00 Fili	ing Fee	

□ \$55.00 Filing Fee &

Certified Copy

(additional copy is enclosed)

MAILING ADDRESS:

Certificate of Status

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

## STREET/COURIER ADDRESS:

 $\square$  \$60.00 Filing Fee,

Certified Copy (additional copy is enclosed)

Certificate of Status &

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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

QUE DICE LLC		
( <u>Name of the Limited Liability Company as it now ap</u> (A Florida Limited Liability Compa	opears on our records.) ny)	
The Articles of Organization for this Limited Liability Company were filed on Florida document number <u>L12000095807</u> .	07/25/12 and assigned	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liability compan	y here:	
The new name must be distinguishable and end with the words "Limited Liability Company."	the designation "LLC" or the abbreviation "L.L.C."	-
Enter new principal offices address, if applicable:	2014	
(Principal office address MUST BE A STREET ADDRESS)	The Action of th	r /
	55 T	·
	Marie and a second	<b>ર્</b>
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)	5.5	-
	Ţ.	-
B. If amending the registered agent and/or registered office address registered agent and/or the new registered office address here:	on our records, enter the name of the	<u>new</u>
Name of New Registered Agent:	-	_
New Registered Office Address:		_
Enter	Florida street address	
	, Florida	_
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 the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

, ,			<del></del>
MGR =	Manager		
AMBR =	Authorized Member	•	

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Brian Bussey	1800 N Bayshore Dr	
		#1905	Remove
		Miami, FL 33132	
			Remove
		<del></del>	Add.
			Remove
			□ Add
			□ Remove
<del></del>			
			Remove
			<u> </u>
<del></del>			Add
			□ Remove

(optional) or filed date and cannot be more than 90 days after
<u>.</u>
·
ithorized representative of a member
chiff

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Filing Fee: \$25.00