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SECRETARY OF STATE TALLAHASSEE. FLORIDA

COVER LETTER

TO: Registration Section Division of Corporations						
SUBJE	CT.	Quantum Cr	reations LLC			
SUDJE.	CI.		Name of Lim	ited Liability Company		_
The end	losed	Articles of A	Amendment and fee(s) are sub-	mitted for filing.		
Please i	etum	all correspor	ndence concerning this matter	to the following:		
			Julia Motchalova			
				Name of Person		
			Quantum Creations LLC			
				Firm/Company		
			15705 NW 13th Avenue			
				Address		
			Miami Gardens, FL 33169	_		
			jmotchalova@gmail.com	City/State and Zip Co	de	
				to be used for future ann	ual report notification)	_
For furt	her in	iformation co	oncerning this matter, please ca	all:		
Julia M	lotcha	lova		305	318-2770	
		Name of	Person	at () Area Code	Daytime Telephone Nun	ber
Enclose	ed is a	check for th	e following amount:			
\$25	5.00 F	iling Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing F Certified Copy (additional copy is	y Certif senclosed) Certif	Filing Fee, icate of Status & ied Copy onal copy is enclosed)
		Registra Division P.O. Bo	NG ADDRESS: ation Section n of Corporations ox 6327 ssee, FL 32314	Regis Divis Clifto 2661	EET/COURIER ADDRESS stration Section ion of Corporations of Building Executive Center Circle hassee. FL 32301	;

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

QUANTUM CREATIONS LLC			
(Name of the Limited Liability Compa (A Florida Limited I	ny as i n Jiability (ow appears on our records.) Company)	
The Articles of Organization for this Limited Liability Company Florida document number L13000029517 This arrandocate is submitted to arrand the following.	were fil	led on 02/26/2013	and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	ility edr	npany here:	
The new name must be distinguishable and contain the words "Limited Liabil	lity Comp	any," the designation "LLC" or the ab	obreviation "L.L.C."
Enter new principal offices address, if applicable:	15705	NW 13th Avenue	
(Principal office address MUST BE A STREET ADDRESS)	Mian	i Gardens, FL 33169	
			ECRE LLAH B FEB
Enter new mailing address, if applicable:	15705	NW 13th Avenue	ASSE
(Mailing address MAY BE A POST OFFICE BOX)	Miam	Gardens, FL 33169	- mo
			7:5
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here		dress on our records, <u>enter</u>	the name of the ne
Name of New Registered Agent:			
New Registered Office Address:			
		Enter Florida street address	
		. Florida	
Nam Designated Assetts Signature (Falancine Basistand Asset)	City		Zip Code
New Registered Agent's Signature, if changing Registered Agent:			
I hereby accept the appointment as registered agent and agroprovisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as pleing filed to merely reflect a change in the registered office company has been notified in writing of this change.	perfori provided	nance of my duties, and I am j d for in Chapter 605, F.S. Or,	familiar with and if this document is

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If Changing Registered Agent, Signature of New Registered Agent

MGR = 3	Manager		
AMBR =	Authorized Member <u>Name</u>	<u>Address</u>	Type of Action
			[7] A 14
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			□ Add
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Tective date, if other than an effective date is listed, the date	the date of fili	ng:	to data of Olio		(optional	l)	4.05.000	7 (2)
ote: If the date inserted in this ocument's effective date on the	s block does not	meet the application	able statutþr	y filing require	ments, this dat	e will not be	listed as	s the
	e Department of	Dime 3 records.						
e record specifies a dela The 90th day after the	yed effective record is filec	date, but no i.	t an effec	tive time, a	: 12:01 a.m	. on the ea	rlier o	f:
February 9		2018						
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