

h13000160672

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

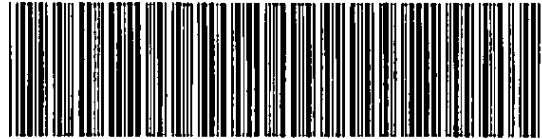
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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05/24/22--01006--013 **35.00

FILED
2022 AUG 30 PM 1:01
SEC. OF STATE
TALLAHASSEE, FL

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: _____

Q Insurance 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:

Geoffrey Riley

Name of Person

Q Insurance LLC

Firm/Company

2531 NW 72nd Ave Ste A Miami, FL 33122

Address

City/State and Zip Code

griley@q-insurance.com

Email address: ~~to~~ be used for future annual report notification)

For further information concerning this matter, please call:

Geoffrey Riley

Name of Person

at

561

Area Code

932-8928

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 Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303



FLORIDA DEPARTMENT OF STATE
Division of Corporations

2022 JUL 30 AM 11:02

NO ONE
RECEIVED
JUL 30 2022

July 27, 2022

SANDY ALDANA RILEY
2531 NW 72ND AVENUE
SUITE A
MIAMI, FL 33122

SUBJECT: Q INSURANCE LLC
Ref. Number: L13000160672

We have received your document for Q INSURANCE LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a CORPORATION, but your entity is a LIMITED LIABILITY COMPANY. Please complete and return the enclosed blank form(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Neysa Culligan
Regulatory Specialist III

Letter Number: 022A00016821

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

FILED

2022 AUG 30 PM 1:01

IQ Insurance LLC

(Name of the Limited Liability Company as it now appears on our records)
(A Florida Limited Liability Company)

SHERIFF'S OFFICE
TALLAHASSEE, FL

The Articles of Organization for this Limited Liability Company were filed on 11-15-2013 and assigned
Florida document number L13000140672.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

IQ Insurance Group LLC

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

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

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

_____ ☐ Change

STATE
NOTARY PUBLIC
TALLAHASSEE, FL
2017 AUG 23

FILED
2022 AUG 30 PM 1:01
CLERK OF DISTRICT COURT
TALLAHASSEE, FL

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated Aug 21st

2022

Signature of a member or authorized representative of a member

Erithrey Riley
Typed or printed name of

Typed or printed name of signee

Filing Fee: \$25.00