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## COVER LETTER

TO: Registration Se Division of Cor			
	QUORS IX, LLC		
SUBJECT:	Name of Lim	ited Leability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
	ondence concerning this matter		
	Jorge A. Alvarez, Esq.		
		Name of Person	
	Rodon Law, PLLC		
		Firm/Company	
	201 Alhambra Circle, Suit	e 504	174 SE SECR TAI
		Address	DE D
	Coral Gables, FL 33134		ETARAS C
		City/State and Zip Code	
	jalvarez@sralaw.com	to be used for future annual report notificat	36 FH 36
For further information c	oncerning this matter, please c		. بدا
Jorge A. Alvarez, Esq.		305 445-8881	
Name o	f Person		lephone Number
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)	S60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addres Registration S	Section	<u>Street Address:</u> Registration Sectio	
Division of C P.O. Box 632		Division of Corpor The Centre of Talla	rations
Tallahassee, 1		2415 N. Monroe St	

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ted Liability Company as (A Florida Limited Liabili	it now appears on our reco	rds.)
iability Company were	e filed on November 19, 2	2014 and assigned
·		
owing:		
f the limited liability	company here:	
vords "Limited Liability Co	ompany," the designation "LL	C" or the abbreviation "L.L.C."
able:		
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BOX)		\$2. 로 -
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	ess on our records, <u>ente</u>	er the name of the new registered
RODON LAW, PER	RODON ALVARE	Z LAW, PLLC
201 Alhambra Circle	, Suite 504	
	Enter Florida street addre	ess
Coral Gables	, <b>F</b>	Florida <u>33134</u>
	City , .	Zip Code
	owing:  of the limited liability of the limite	registered office address on our records, enters here:  RODON LAW: PISIC  RODON LAW: PISIC  Roll Alhambra Circle, Suite 504  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 Changing Registered Agent, Signature of New Registered Agent

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
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			□Remove
			Change
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ffective date, if other than the an effective date is listed, the date musiote: If the date inserted in this blocument's effective date on the Defective date.	t be specific and cannot be prior to dook does not meet the applicable	ate of filing or more than 90 days	optional) after filing.) Pursuant to 605.0207 s, this date will not be listed as
record specifies a delayed effectiv Lis filed.	date, but not an effective time,	at 12:01 a.m. on the earlier o	of: (b) The 90th day after the
	2024		
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