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COVER LETTER

TO: Registration Se Division of Cor			۵	
SUBJECT:) uality T	REASURES, LL	1 C	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please return all correspo	ndence concerning this matter	to the following:		
	Allan S	Sea/S Name of Person		
		Firm/Company		
	130 E AN	N Stz	,	7073
				7023 OCT
•	Punta G	orda F/ 3	3950	5
	Q+LLC15 E-mail address: (ORAG F/ 3 City/State and Zip Code ORAG F/ 3 City/State and Zip Code ORAG F/ 3 To be used for future annual report noti	fication)	M 9: 01
For further information c	oncerning this matter, please c	all:	;~	m -
ALLAN SE	ALS	at (3/4) 8/4-6 Area Code Daytim	3453	
Name o	f Person	Area Code Daytim	e Telephone 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)	Section Section Section Sectificate of Certified Copy (additional copy)	f Status &

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limiter	d Liability Company A Florida Limited Lial	as it now appears on our bility Company)	records.)		
The Articles of Organization for this Limited Liability Company were filed on 10/11/2023 Florida document number 1500002/91/					
This amendment is submitted to amend the follow	wing:				
A. If amending name, enter the new name of	the limited liabilit	ty company here:			
The new name must be distinguishable and contain the wo	rds "Limited Liability	Company," the designation	on "LLC" or the abbre	viation "L.L.C."	
Enter new principal offices address, if applica	.ble:		7.C.	30C	
(Principal office address MUST BE A STREET			- 1.	-	
Enter new mailing address, if applicable:	-		7-X 1953 m	9: 0	
(Mailing address MAY BE A POST OFFICE B	<u>:0X)</u>				
B. If amending the registered agent and/or reagent and/or the new registered office address	s here:		, <u>enter the name o</u>	f the new regist	
Name of New Registered Agent:		V Sigals			
New Registered Office Address:	130 E.F	Finier Florida siree	a address		
	Punta	Gonda	, Florida <u>3</u> 5	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 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 **Address Type of Action** <u>Title</u> Name MGR ATAN Seals 130 E ANN St. Punta Goreda # / 33510 □Remove _____ Change Diegeter John White 7547 COCO Plin DAdd Punta Gorda // 33955 _____ □Change □Add 2023 O∏ Remove

Change □Remove _____ Change Remove __ □Change Remove

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effective date, if other than the date of filing:	(opti	onal)	Pursuant	In 605 0
If the date inserted in this block does not meet the applicable statut ment's effective date on the Department of State's records.				
ment's effective date on the Bepartment of State 3 records.				
ord specifies a delayed effective date, but not an effective time, at 12: filed.	01 a.m. on the earlier of: (b) The	90th day	y after t
a 10/11 2023				