

4150000 47266

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

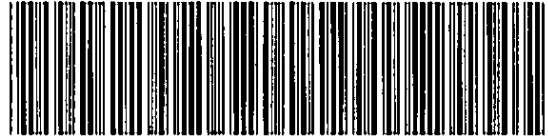
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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Office Use Only



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FILED
2019 MAY 24 AM 5:30
FALL ARIZONA DISTRICT CLERK

05/24/19 00:15:00

05/24/19--01015 -022 \$25.00

MAY 25 2019
J. HARRIS

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: QUAGILE 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:

Vijayalakshmi Ramalingam

Name of Person

QUAGILE LLC

Firm/Company

suite 223, 13046 Race Track Road

Address

TAMPA FL 33626

City/State and Zip Code

viju_1312@yahoo.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Vijayalakshmi Ramalingam

813 9922015

at ()
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|---------------------------------------------|------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

QUAGILE LLC

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

The Articles of Organization for this Limited Liability Company were filed on 03/16/2015 and assigned
Florida document number L15000047268.

This amendment is submitted to amend the following:

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

PROAGILE SOLUTIONS 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)

Suite 223, 13046 Race Track Road

TAMPA FL 33626

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

Suite 223, 13046 Race Track Road

TAMPA FL 33626

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:

Vijayalakshmi Ramalingam

New Registered Office Address:

Suite 223, 13046 Race Track Road

Enter Florida street address

TAMPA

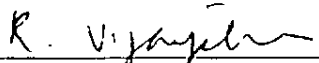
Florida 33626

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 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>	<u>Address</u>	<u>Type of Action</u>
AMBR	JAY CHANDRAN	11633 Meridian Point Dr	<input type="checkbox"/> Add
		TAMPA FL 33626	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Change

2017 MAY 22 AM 10:00
 TALLAHASSEE, FLORIDA
 VOLUME 11354-11354

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

E. Effective date, if other than the date of filing: Feb 26 2018 (optional)

(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)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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 _____, _____

R. Vijayaraj
Signature of a member or author

Signature of a member or authorized representative of a member

VIDYALAKSHMI KAMALINGAM

Typed or printed name of signee

2018 MAY 24 AM 5:30
3. RETURN OF CHILD
TALL ARMSTRONG, INDOOR