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(R	equestor's Name)	
(A	ddress)	
(A	ddress)	
(C	ity/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
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COVER LETTER

Division of Corpo			
SUBJECT:		ors Quality ted Liability Company	LLC
The enclosed Articles of A	mendment and fee(s) are subr	nitted for filing.	
Please return all correspond	dence concerning this matter t	to the following:	
	Eleaza	Name of Person	
	The Out	-doors Quality	<u> </u>
	1610 C	oronado Ave	
	Fort Pi	erce, F2 340 City/State and Zip Code	182
	Construction E-mail address: (to	ction by amigos o be used for future annual report notific	& yahoo.com
For further information cor	ncerning this matter, please ca	11:	
Eleazar Name of 1	Amador	at (772) 519 - Daytime	Telephone Number
Enclosed is a check for the	following amount:		
S25.00 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/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liab)	ors Quality Company as it now appears on our da Limited Liability Company)	records.)
The Articles of Organization for this Limited Liability Florida document number <u>2.15000</u> 6.15	Company were filed on _O4/	08/2015 and assigned
This amendment is submitted to amend the following:	,	
A. If amending name, enter the new name of the lin	nited liability company here:	
The new name must be distinguishable and contain the words "Li	mited Liability Company," the designati	on "LLC" or the abbreviation "Ltt."
Enter new principal offices address, if applicable:		- CE AND
(Principal office address MUST BE A STREET ADD	ORESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	·	000
B. If amending the registered agent and/or reg registered agent and/or the new registered office ad		records, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida stre	et address
		, Florida
	City	Zip Code
Name Danietarad Agant's Signatura, if changing Danietar	od Agant:	

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
7mBR	Bernabe Simon	976 8th St.	□ Add
		976 8th St. Vero Beach, 12 32962	Remove
			🗆 Change
			Add
			Remove
			Change
			🗖 Add
			□ Remove
			Change
			□ Add
			□ Remove
			🗆 Change
			Add
			□ Remove
			□ Change
			□ Add
			Remove
			Change

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ffective date, if other than the date of filing: fan effective date is listed, the date must be specific and cannot be prior to date of filing or a	(optional)
an effective date is listed, the date must be specific and cannot be prior to date of filing or a force: If the date inserted in this block does not meet the applicable statutory fili	more than 90 days after filing.) Pursuant to 605.0 ng requirements, this date will not be listed
locument's effective date on the Department of State's records.	
	hima an 17.01 a ma an tha annia
e record specifies a delayed effective date, but not an effective. The 90th day after the record is filed.	time, at 12:01 a.m. on the earner
Dated 12 11 17	

Page 3 of 3

Filing Fee: \$25.00