## 116000 198410

(Requ	uestor's Name)	
(Addr	ess)	
(Addr	ess)	
(City/	State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
(Busi	ness Entity Nan	ne)
(Doci	ument Number)	
Certified Copies	Certificates	of Status
Special Instructions to Fi	ling Officer:	

Office Use Only



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## **COVER LETTER**

TO:

Registration Section Division of Corporations

		•		
, SUBJECT:	IQ BIOTI	ECH, LLC		
SUBJECT:	Name of Lim	ited Liability Company		
The conditional Amelians of	Assessed as a second for the second for the second	mitted for Olive		
	Amendment and fee(s) are sub			
Please return all correspo	ondence concerning this matter	to the following:		
		CARLOS SALAS		
		Name of Person		
		IQ BIOTECH, LLC		
		Firm/Company		
	Cambridge Innov	ration Center, 1951 NW 7th	Ave Suite #600	
		Address		
		Miami, FL. 33136		
		City/State and Zip Code		ea
		mdiaz@mariadiazcpa.com		
		to be used for future annual rep	ort notification)	grajiun 23 și de l
For further information of	concerning this matter, please c	all:		$\sim$ $\omega$
JOSE ANTON	IO DE COTE	305 at ()	490 4928	
Name o	of Person	Area Code	Daytime Telephone Number	·
Enclosed is a check for t	he following amount:			
□ \$25.00 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy tadditional copy is enclose	ed) Certified	e of Status &
Mailing Address Registration	Section	•	on Section	
Division of C P.O. Box 632			of Corporations to of Tallahassee	
Tallahassee,			Monroe Street, Suite 8	10

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

IQ BIOTECH, LLC
(Name of the Limited Liability Company as it now appears on our records.)

The Articles of Organization for this Limited L Florida document number L16000198410	iability Company	were filed on and as	ssigned
This amendment is submitted to amend the following	lowing:		
A. If amending name, enter the new name of	of the limited liab	ility company here:	
The new name must be distinguishable and contain the	words "Limited Liabi	lity 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)		Cambridge Innovation Center. 1951 NW 7th Ave.	
		Suite #600 Miami, FL. 33136	10,2
		÷ .	. 2
Enter new mailing address, if applicable:		Cambridge Innovation Center. 1951 NW 7th Ave.	72
(Mailing address MAY BE A POST OFFICE BOX)		Suite #600 Miami, FL. 33136	<del></del>
			ु, त हार
agent and/or the new registered office addre		address on our records, enter the name of the n	ew registered
Name of New Registered Agent:	703E ANTON	TO DE COTE	<del></del>
New Registered Office Address:	Cambridge Innovation Center. 1951 NW 7th Ave - Suite #600		
	Enter Florida street address		
	Miami —	, Florida 33136 Civ Zip Cod	
No. Declared Access Clauseum if showing	Desistant America	,	e
New Repistered Agent's Signature, if changing			
provisions of all statutes relative to the proj	per and complete	ee to act in this capacity. I further agree to con performance of my duties, and I am familiar w provided for in Chapter 605, F.S. Or, if this do	vith and

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
MGR	DE COTE, JOSE ANTONIO	Cambridge Innovation Center, 1951 NW 7th Ave	□Add
		Suite #600, Miami Fl 33136	□Remove
MGR	ORTEGA, ALVARO	8208 NW 30 TERRACE	🗀 Add
		MIAMI, FL 33122	≣Remove
AMBR SALAS, CARLOS	SALAS, CARLOS	Cambridge Innovation Center, 1951 NW 7th Ave	🖹 Add
		Suite #600, Miami FI 33136	🗆 Remove
			□Change
			DAdd
			! Remove
			☐ Change
			□Àdd ⊋
		<del></del>	RemovE. ضا
			□Change
			🗆 Add
			□Remove
			☐ Change

If amending	any oth information,	enter change(s) here: (Alfach a	idatitonal sheets, if necessary,/	
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ffective da	te, if other than the date	of filing:	(optional)	
<u>Note:</u> If the	date inserted in this block of	loes not meet the applicable statuto	ng or more than 90 days after filing.) Pursuar ry filing requirements, this date will not	n to 605,0207 (3)() be listed as the:
socument's e	effective date on the Depart	ment of State's records.		- ·
record speci d is filed.	ifies a delayed effective dat	e, but not an effective time, at 12:0	a.m. on the earlier of: (b) The 90th d	
				•
Dated	JUNE, 10	2020		51 <del>4.</del>
	*	4) ( ld) ef		
	Sign	ature of a member or authorized represe	mustive of a member	<del></del>
		CARLOS SALAS		
		Typed or printed name of vi	gnce	<del></del>