

417000052800

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

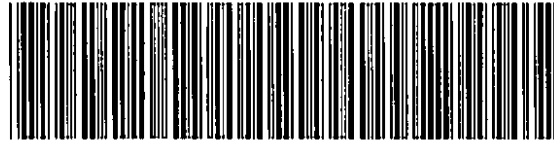
(Business Entity Name)

(Document Number)

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17 JUL 18 PM 3:28  
DIVISION OF CORPORATIONS

O. SIMMONS  
JUL 18 2017

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Obbe Graphics 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:

Alquavia Brown  
Name of Person

Obbe Graphics LLC  
Firm/Company

738 NW 3<sup>rd</sup> Ct  
Address

Hallandale, FL 3300  
City/State and Zip Code

Obbegraphics@gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Alquavia Brown at (754) 235-4327  
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- ☐ \$25.00 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

RECEIVED  
2017 JUL 18 PM 3:06  
TALLAHASSEE, FLORIDA  
SECRETARY OF STATE

Alquavia

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

Qdee Graphics 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 03-07-2017 and assigned Florida document number L17000052800.

This amendment is submitted to amend the following:

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

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)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

**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:

New Registered Office Address:

*Enter Florida street address*

*City*

*Florida*

*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>
MGR	Brittany Darville	6201 NW 4 <sup>th</sup> Ave	<input type="checkbox"/> Add
		miam. FL 33150	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AP	Derrick Gracia	6201 NW 4 <sup>th</sup> Ave	<input type="checkbox"/> Add
		miami FL 33150	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
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DIVISION 66 CORP. & ASSOCIATES  
JUL 28 PM 3:28  
Remove  
Change

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

There is no further contact with  
Mr. DERNICK and Ms. Brittany.

17 JUL 18 PM 3:22  
DIVISION OF CORPORATIONS

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E. Effective date, if other than the date of filing: 07-07-2017 (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 July 14, 2017



Signature of a member or authorized representative of a member

Aiquavia Brown

Typed or printed name of signer