L17000083312

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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Brando B QUNTERO PLIC 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:
Branda B Quintero
Name of Person
Firm/Company
6300 N Wickham #162
Address
Melbourne FL 32940
City/State and Zip Code Yealtywith blenda and I. 10m E-mail address! (to be used for future annual report in diffication)
For further information concerning this matter, please call:
Brenda Chinter at (321) U04-2995 Name of Person at (321) Daytime Telephone Number
Enclosed is a check for the following amount:
□ \$25.00 Filing Fee □ \$30.00 Filing Fee & □ \$60.00 Filing Fee. Certificate of Status 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 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**

	intero PLLC
(<u>Name of the Limited Liability Com</u> (A Florida Limited	pany as it now appears on our records.) d Liability Company)
The Articles of Organization for this Limited Liability Compan Florida document number <u>L17000083312</u> .	y were filed on 04/03/2017 and assigned
This amendment is submitted to amend the following:	
A. If amending name, <u>enter the new name of the limited lia</u> Brenda B QUNHERO LAN	
The new name must be distinguishable and contain the words "Limited Lial	bility 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)	Melbourne FL 32940
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BON)	1750 Old Glory Blud Melbourne FL 32940
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, enter the name of the new registe
Name of New Registered Agent: BHO	nda B Quintero Lande
New Registered Office Address: 175	o Old Glory Blud Enter Florida street address
IM	Elbourne . Florida 32940 City Zip Code
	City Zip Code
New Registered Agent's Signature, if changing Registered Agent	t •

Thereby 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, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	Brenda Balintero Lande	1750 Old Glory Blud	□Add
	Lande	Melbourne FZ 32940	□Remove
			KChange
			□Add
			□Remove
			□Change
			□Remove
			□Change
			□Add
			□Remove
			□Change
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			□Change

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etive date, if other than the date of filing: effective date is listed, the date must be specific and ee: If the date inserted in this block does not me	annot be prior to	date of filing or m	ore than 90 days after	filing.) Pursuant to 605.02
iment's effective date on the Department of St			5 1 2 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	, date with the residue
ord specifies a delayed effective date, but not a filed.	n effective tim	e, at 12:01 a.m. c	on the earlier of: (b) The 90th day after th
a August	2025			
D	A			
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Typed or printed name of signee