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(Re	equestor's Name)	
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PICK-UP	TIAW [MAIL
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Special Instructions to	Filing Officer:	
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Office Use Only



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	Registration So Division of Cor			
ento iliz	QUE	RIDALOLA LLC		
SUBJEC	_1:	Name of Lim	ited Liability Company	
The encl	osed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please re	turn all correspo	ondence concerning this matter	to the following:	
		LEONARDO CONC	СНА	
		QUERIDALOLA LI	Name of Person .C	
		20762 SW 80TH CT	Firm/Company	Illowing: Inne of Person Address Interpretation Address Interpretation I
		MIAMI, FL 33189	Address	
			City/State and Zip Code CESMIAMILLC@GMAIL.COM	
For furth	er information c	E-mail address: (concerning this matter, please c	·	cation)
JF	NNY COVARE	RUBIA		
	Name o	f Person	Area Code Daytime	Telephone Number
Enclosed	l is a check for th	he following amount:		
□ \$25.	00 Filing Fec	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy

MAILING ADDRESS:

TO:

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



December 18, 2018

Leonardo Concha Queridalola LLC 20762 SW 80th Ct. Miami, FL 33186-9

SUBJECT: QUERIDALOLA LLC Ref. Number: L17000091190

We have received your document for QUERIDALOLA LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Simply adding "of Florida" or "Florida" to the end of an entity name **DOES NOT** constitute a difference. Please select a new name and make the substitution in all appropriate places. One or more words may be added to make the name distinguishable from the one presently on file.

When the document is resubmitted, please return a copy of this letter to ensure that your document is properly handled.

If you have any questions concerning the filing of your document, please call (850) 245-6900.

Lyn Shoffstall Bureau Chief

Letter Number: 418A00025933

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

2019 JAN 14 PM 2: 09

	QUERIDALOLA LLC	SECRET	ARY OF STATE
(Name of the Limited Liz (A Flo	ability Company as it now appears orida Limited Liability Company)	on our records 11 A	HASSEE, FL
The Articles of Organization for this Limited Liabilit	ty Company were filed on	04/25/2017	and assigned
Florida document number [.17000091190]			
This amendment is submitted to amend the following	g:		
A. If amending name, enter the new name of the	limited liability company her	<u>e</u> :	
DESIGN PROJECT SO	DLUTIONS LLC		
The new name must be distinguishable and contain the words	'Limited Liability Company," the des	ignation "LLC" or the a	bbreviation "L.L.C."
Enter new principal offices address, if applicable:		. 	
(Principal office address MUST BE A STREET AL	ODRESS)	<u>.</u>	
Enter new mailing address, if applicable:			
Mailing address MAY BE A POST OFFICE BOX	2		
			
B. If amending the registered agent and/or re registered agent and/or the new registered office a		our records, <u>enter</u>	the name of the ne
Name of New Registered Agent:		·	
New Registered Office Address:			
	Enter Florid	a street address	
		, Florida	
	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

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fective date, if other than in effective date is listed, the date ote: If the date inserted in the reument's effective date on the	e must be specific and ca tis block does not mee	et the applicab			
record specifies a del The 90th day after the	ayed effective dat record is filed.	te, but not a	an effective tim	e, at 12:01 a.m. (on the earlier of
JANUARY 9TH		2019	•		
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Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00