Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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	Division of Corporations	7 % ( T)	Ę
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	Account Number : I28008800019	7,,70	8
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	Fax Number : (305)675-5944	577	2
*Ent	er the email address for this business entity to be used fo	or futui	re
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Estimated Charge	\$25.00	2 / 2022

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	QC TRADE GROUP LLC		·
(Name of the Limited L. (A.F.	isbility Company as it new appears of lorida Limited Liability Company)	our records.)	
The Articles of Organization for this Limited Liabil		12/27/2017	and assigned
Florida document numberL17000262318			202 SEC
This amendment is submitted to amend the following			788
A. If amending name, enter the new name of th			26 B
The new name must be distinguishable and contain the word	s "Limited Liability Company," the desi	gnetion "LLC" or il	
Enter new principal offices address, if applicable			70.75 77.75
(Principal office address MUST BE A STREET A	<u> </u>		
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BO	<u></u>		
B. If amending the registered agent and/or regagent and/or the new registered office address	istered office address on our rec here:	cords, enter the	name of the new registered
Name of New Registered Agent:			
New Registered Office Address:	Enter Flori	da street address	
		Florid	Zip Code
	City		ap some

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 heing 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>	Name	Address	Type of Action
MGR	ZAMIRA RODRIGUEZ	2001 NW 107TH AVE SUITE 250	\( \overline{\overl
		DORAL, FL 33172	□Remove
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	(optional)  are 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 date inserted in this block does not meet the applicable statutory filing requirements, this date will not be list ffective date on the Department of State's records.
ie record speci	ffies's delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after
ord is filed.	3026
ord is filed.	SEPTEMBER 26 2022