

Division of Corporations

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L18000067529

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To: Division of Corporations
Fax Number : (850) 617-6363

From: Account Name : WYLIE & ASSOCIATES, LLC
Account Number : I201700000C13
Phone : (407) 965-3896
Fax Number : (407) 297-0588

2018 JUN 28 AM 8:01

T L C

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: doug@wylieassoc.com

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FACILITY
DIVISION OF CORPORATIONS
TALLAHASSEE FL

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
QUACHLE, LLC**

Certificate of Status	1
Certified Copy	0
Page Count	01
Estimated Charge	\$30.00

JUN 29 2018
J. HARRIS

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

QUACHLE, 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 March 13, 2018 and assigned
Florida document number 118000067529

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

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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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	Tuan Quach	6526 Old Bridge Road Ste 120-313	☐ Add
		Windermere, FL 34786	☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
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			☐ Remove
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			☐ Add
			☐ Remove
			☐ Change

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

E. Effective date, if other than the date of filing: _____ (optional)
 (1) an effective date is fixed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to MSA 6207 (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:
 (a) The 90th day after the record is filed.

Dated, June 26, 2018

2018

NLM 12:21
 Signature of a member or authorized representative of a member

Nicholas Lu

Typed or printed name of signer

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 11:11:11

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