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APR 05 2019
S. YOUNG

COVER LETTER

Division of Cor			
SUBJECT: OU	1.1.0.		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	MARIA T	OJALLES Name of Person	
		Name of Person	
	Qu. LLC	Firm/Company	
	92 SW 3	St Unit 2111	
	MIAMI F	FL 33130 City/State and Zip Code	
	maytegalks E-mail address:	to be used for future annual report noti	rication)
For further information c	oncerning this matter, please c	all:	
MARIA WAY	UES of Person	at (786) 6305 Area Code Daytime	a Telephone Number
Enclosed is a check for the	he following amount:		
□ \$25.00 Filing Fee	☐ \$30.00 Filing Fec & 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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Comp (A Florida Limited	any as it now ap	ears on our recor	<u>ds.</u>)
(A Florida Limited	Liability Compan	у)	
he Articles of Organization for this Limited Liability Company	y were filed on	06/29	2018 and assigned
lorida document number L_18000159577		,	f .
his amendment is submitted to amend the following:			
			56. 5
. If amending name, enter the new name of the limited lia	bility company	<u>here</u> :	
			美国 第二量
he new name must be distinguishable and contain the words "Limited Liab	oility Company," tl	ne designation "LL	C" or the abbreviation (E.L.C.
nter new principal offices address, if applicable:			
			်ပ္သည့
Principal office address MUST BE A STREET ADDRESS)			<u> </u>
			
	\mathcal{O}_{\bullet}	1	~
nter new mailing address, if applicable:	16 Box	10946	MIAMI FL
Mailing address MAY BE A POST OFFICE BOX)	33	101	
. If amending the registered agent and/or registered of	office address	on our record	ls, <u>enter the name of the n</u>
egistered agent and/or the new registered office address he	<u>re</u> :		
Name of New Registered Agent:		· · · · · · · · · · · · · · · · · · ·	
N B : 100 AH			
New Registered Office Address:	Enter Florida street address		
	City	, F	lorida
Durling of Annual Clause 19 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	•		глу Соме
ew Registered Agent's Signature, if changing Registered Agent	<u>:</u>		

If Changing Registered Agent, Signature of New Registered Agent

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 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

Title	<u>Name</u>	<u>Address</u>	Type of Action
MGR	HUMBERTO MEZA		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
			Remove
		PO. Box 10946 MAMITL 33	Change
HGR	MARIA WALLES		□ Add
			Remove
		PO.BOX 10946 MIAMI FL331	○ 1 . 💆 Change
MGR	AUTOMO MEZA		
			Remove
		5% only	🔀 Change
			□ Remove
			Change
			□ Remove
			Change
			□ Remove
			Change

\mathbb{D}_{ϵ}	ear Sir/Mrs,
	We like to request from your office make the
<u>c</u>	ranges in ar company.
1)	Kindly change are principal address from. 2 SW 3St unit 4111 miami FL 33130 to
Po	Box. 10946 migmi FL 33101 (10946)
2)	Kindly change ar percentage in the Company. on 50% MARIA OVALLOS 50% HUMBERTO MERA D 95 % MARIA CUALLOS band 5 % HUMBERTO HERA
m effectiv o <u>te:</u> If th	date, if other than the date of filing:
	d specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlied the day after the record is filed.
ited	03/21, 2019.
	Signature of a member or authorized representative of a member

Page 3 of 3

Filing Fee: \$25.00