

L18000168865

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

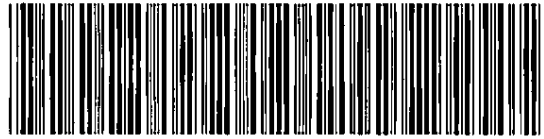
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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18 NOV 26 PM 9:50
TALLAHASSEE, FLORIDA

11/26/18--01018--003 **30.00

NOV 27 2018 10:55
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

K. SALY

NOV 27 2018

**CORPORATE
ACCESS,
INC.**

When you need ACCESS to the world

236 East 6th Avenue, Tallahassee, Florida 32303
P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666, Fax (850) 222-1666

WALK IN

PICK UP: 11/26 Glinda

- ☐ **CERTIFIED COPY** _____
- XX** **PHOTOCOPY** _____
- XX** **CUS** _____
- XX** **FILING** LLC Amend _____

1. **QUANTUMGENIX LABS, LLC**
(CORPORATE NAME AND DOCUMENT #) _____
2. _____
(CORPORATE NAME AND DOCUMENT #)
3. _____
(CORPORATE NAME AND DOCUMENT #)
4. _____
(CORPORATE NAME AND DOCUMENT #)
5. _____
(CORPORATE NAME AND DOCUMENT #)
6. _____
(CORPORATE NAME AND DOCUMENT #)

SPECIAL INSTRUCTIONS:

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Quantumgenix Labs, LLC.
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:

Jorge Almanza
Name of Person

Quantumgenix Lab, LLC.
Firm/Company

2021 NW 136 Ave. #370
Address

Sunrise FL - 33323
City/State and Zip Code

geoa3500@yahoo.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jorge Almanza at (954) 534-4443
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|---|---|--|--|
| <input type="checkbox"/> \$25.00 Filing Fee | <input checked="" type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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

Quantumgenix Labs, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

FILED
18 NOV 26 PM 9:55
CLERK OF CIRCUIT COURT
JUDICIAL CIRCUIT IN AND FOR
DADE COUNTY, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 7/13/18 and assigned
Florida document number L18000168865

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)

2021 NW 136 Ave #370
Sunrise FL. 33323

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

2021 NW 136 Ave. #370
Sunrise FL. 33323

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:

Jorge Almansa

New Registered Office Address:

2021 NW 136 Ave. #370

Enter Florida street address

Sunrise Florida 33323

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

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	Jorge Almansa	2021 NW 136 Ave	<input checked="" type="checkbox"/> Add
		#370 Sunrise	<input type="checkbox"/> Remove
		FL. 33323	<input type="checkbox"/> Change
MGR	George Almansa	7029 Stirling Rd.	<input type="checkbox"/> Add
		APT 4103 Davie	<input checked="" type="checkbox"/> Remove
		FL. 33324	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

18 NOV 26 PM 9:55
FILED

ALLAH, FLORIDA

FILED
18 NOV 26 PM 9:57
TALLAHASSEE, FLORIDA

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

11/22/18

Signature of a member or authorized representative of a member

Torge Almansa

Typed or printed name of signee